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UFR

AUDIT & PREPARATION MANUAL

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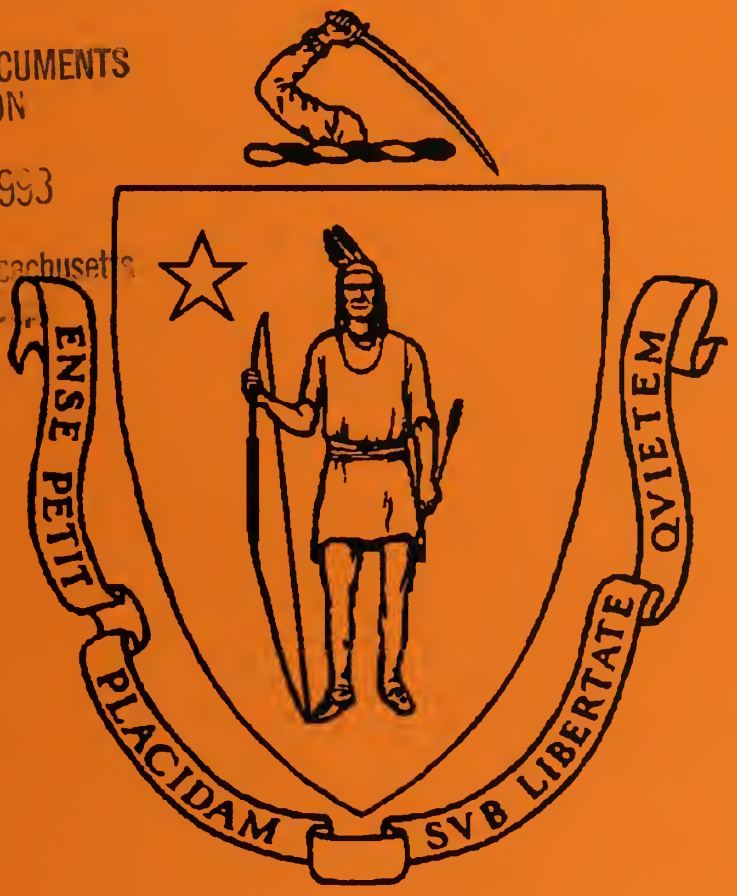

Under 808 CMR 1.00

Commonwealth of Massachusetts
Department of Procurement and General Services
Division of Purchased Services
Fiscal Year 1993

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COMMONWEALTH OF MASSACHUSETTS

AUDIT AND PREPARATION

MANUAL

UNIFORM FINANCIAL STATEMENTS AND INDEPENDENT AUDITOR'S REPORT

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ILLUSTRATIVE FILING REQUIREMENTS
Cover Page, Financial Statements, Schedules and Board of Directors' Representation Letter

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Approved by: Philmore Anderson III, State Purchasing Agent

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UFR PREPARATION AND AUDIT CHECK LIST

1. Check if one or more of the following elements of the UFR have been filed as required:

   ——— Cover Page must always be filed.

   ——— Auditor's Reports (at least 3 for audited Financial Statements and 1 for reviewed Financial Statements)

   ——— Balance Sheet

   ——— Statement of Revenue and Expenses and Changes in Fund Balances

   ——— Statement of Functional Expenses

   ____ Notes to the Financial Statements

   ____ Schedule of Federal Financial Assistance (if required)

   ——— Board of Directors' Acknowledgement Letter

2. ——— OMB Circular A-133 audit was conducted if required.

3. ——— Audit was conducted in accordance with generally accepted government auditing standards (GAGAS).

4. ——— Supplemental information paragraph was included in Independent Auditor's Report or separate report as required by Auditing Standards SAS 29 and 52.

5. ——— Independent Auditor's Reports meet reporting standards of Generally Accepted Auditing Standards.

6. ——— Information in supplemental schedules reconciles and is in agreement with the basic financial statements.

7. ——— Independent Auditor opined on the Statement of Functional Expenses.

8. ——— Financial statements were prepared in accordance with the AICPA Audit Guide for Voluntary Health and Welfare Organizations, as required.

9. ____ Administration (Management and General) costs were reported in the administration column and not in programs as direct program costs.

10. ——— Full-time Equivalents (FTEs) were reported as required.

FILING REQUIREMENTS

Who Must File?

In accordance with Chapter 133, section 113 of the Acts of 1992 and the provisions of regulation 808 CMR 1.00, except as provided under Exceptions/Exemptions, below, every individual, group, partnership, trust, corporation or other legal entity which owns or operates one or more programs of social, special education, mental health, mental retardation, habilitative, vocational, employment and training, or elder services programs, including any program provided pursuant to M.G.L. c. 71B, but excluding any program or service which is reimbursable under Title XIX of the Social Security Act, which the Commonwealth of Massachusetts or any of its agencies or political subdivisions purchased services at any time during the provider's fiscal year must submit properly completed Uniform Financial Statements and Independent Auditor's Report (UFR) for that fiscal year.

Why File?

Failure to submit a timely and a properly completed Report within thirty (30) days of the filing deadline shall result in a withholding of up to ten percent (10%), as determined by the Division, of the provider's monthly billing by the purchasing governmental unit. In addition, the Division shall request that the purchasing governmental unit determine that the provider is ineligible for the ready payment system under regulation 815 CMR 3.10 (1). Delinquent filers providing services to agencies of the Executive Office of Health and Human Services may also fail to meet contract and ready payment prequalification for contract authorization.

What to File:

One must file a properly prepared Uniform Financial Statements and Independent Auditor's Report (UFR) or a UFR cover page and Exemption documentation or alternate report approved by the Division of Purchased Services (DPS) in accordance with these instructions. A paper copy of the UFR must be filed along with the Lotus template if it has been provided free of charge. Incomplete or improperly prepared reports will not be deemed received until corrected and returned to DPS. The UFR consists of audited basic financial statements, independent auditor's reports, unaudited supplemental information (schedules, forms, and letters) that are explained in the overview and page-by-page instructions of this document. The constituent parts of the UFR, as noted above, must be filed under the same cover and be mechanically fastened (bound/stapled) and the supplemental

information must be auditor submitted (referenced in the auditor's report on the financial statements or in a separate report). UFR filers subject to the single audit provisions of OMB Circular A-133 should consult the instructions in this document for guidance concerning reporting and filing requirements.

The basic financial statements of the UFR must be prepared and audited as prescribed by the accounting principles and auditing considerations recommended by the American Institute of Certified Public Accountants (AICPA) in its industry audit guide Audits of Voluntary Health and Welfare Organizations (AVHW). The General Conditions of the Master Agreement, executed between most providers and the Commonwealth, also contractually require the provider's financial statements to be prepared in accordance with the AVHW and that its books and records be maintained in accordance with the generally accepted accounting principles recommended in the AVHW. The basic financial statements that are utilized for this year's UFR filing must be prepared using AVHW financial statements in the form illustrated in these instructions and be audited in accordance with Generally Accepted Government Auditing Standards (GAGAS), which incorporates the AICPA standards for fieldwork and reporting. Basic financial statements of UFRs that have not been prepared and presented as recommended in the AVHW are considered to be improperly prepared and will not be deemed received until corrected and returned to DPS. Generally Accepted Government Auditing Standards are promulgated in the Standards for Audit of Governmental Organizations, Programs, Activities and Functions ("Government Auditing Standards" or "Yellow Book"), issued by the Comptroller General of the United States. The use of an alternate reporting format for UFR filing must be preapproved by DPS through a waiver process when the provider's circumstances and characteristics have not been considered for alternate reporting in the alternate report section or the exceptions/exemption section of these instructions. UFR preparers that feel they may qualify to file an alternate report should consult the Alternate Report section or the Exceptions/Exemption section of these instructions for further guidance.

Alternate Reporting:

The vast majority of organizations filing with DPS are voluntary health and welfare organizations that utilize the American Institute of Certified Public Accountants (AICPA) industry audit guide Audits of Voluntary Health and Welfare Organizations (AVHW) for the preparation and audit of their UFRs. These organizations are voluntary health and welfare organizations by virtue of the fact that they are nonprofit organizations that concentrate their efforts and expend their resources in an attempt to solve health and welfare problems of society, and

their support is primarily derived from charitable contributions and reimbursements furnished through program service fees by agencies of the Commonwealth and cities and towns for the delivery of programs of social services. DPS and most other governmental organizations consider charitable contributions and social service program service fees to be public funds. DPS recognizes that not all UFR filers are organized as nonprofit organizations to solve the health and welfare problems of a society that receives its support primarily from public funds for the delivery of social services. It is also recognized that use of the AVHW audit guide for the preparation and audit of a provider's UFR that is clearly not a voluntary health and welfare organization may not meet the provider's report users needs. Many organizations file with DPS because of federal single audit obligations and if it were not for these obligations they would file only a cost report with the rate setting commission in that a substantial portion their support is derived from medicaid service fees. Other organizations may be for-profit business enterprises. A substantial number of these other organizations need to prepare and have their financial statements audited in accordance with provisions other than AVHW that have been established in various AICPA audit guides for the industry in which they operate.

Providers that are clearly not voluntary health and welfare organizations by virtue of the fact that they have been organized and incorporated as a college or university, hospital or provider of health care services should file an alternate report.

Colleges, universities, hospitals and providers of health care services should file an alternate report consisting of basic financial statements audited in accordance with generally accepted government auditing standards and presented, prepared and audited utilizing the accounting principles, financial statement format and auditing considerations prescribed in the appropriate AICPA industry audit guide for the industry in which the provider operates. In addition, each social service program purchased by agencies of the Commonwealth or cities and towns must be reported separately in the UFR supplemental schedules. All other revenues and expenses associated with non-social service programs or activities of the provider that are <u>not</u> purchased by agencies of the Commonwealth or cities and towns should be reported separately as one program in the supplemental schedules of the UFR. The total of all program revenues and expenses reported in the UFR supplemental schedules must reconcile with the appropriate totals for revenues and expenses in the basic financial statements. All unaudited supplemental schedules and information of the UFR must be filed as auditor-submitted documents with appropriate reference made in the Auditor's Report on the basic financial statements or in a separate report under the same cover. In addition, if the provider is subject to the single audit provisions of OMB Circular A-133, all other auditor's reports, statements and schedules required by OMB Circular A-133 must be filed.

Provider organizations other than colleges, universities, hospitals and providers of health care services that feel they may

qualify to file an alternate report must seek pre-approval from DPS prior to filing. Provider organizations that believe they should utilize the AICPA audit and accounting guide Audits of Certain Nonprofit Organizations for filing an alternate report must seek pre-approval from DPS prior to filing. The Exceptions/Exemptions section of these instructions also provides specific alternate report filing guidance for certain providers that are not discussed above.

Audit Services:

Procurement of Audit Services

While not an audit standard of GAGAS or a UFR filing requirement, it is important that a sound procurement practice be followed when contracting for audit services. Sound contract award and approval procedures, including the monitoring of contract performance, should be in place. The objective and scope of the audit should be made clear. In addition to price, other factors to be considered include: the responsiveness of the bidder to the request for proposal; the past experience of the bidder; availability of bidder staff with professional qualifications and technical abilities; and whether the bidder organization participates in an external quality control review program. The Division of Purchased Services has developed guidelines for the preparation of a request for audit proposals (available upon request) that have been tailored for UFR and OMB Circular A-133 audit procurement.

Auditor Responsibility

The comprehensive nature of government auditing places on the audit organization the responsibility for ensuring that the audit is conducted by personnel who collectively have the necessary skills; that independence is maintained; that applicable standards are followed in conducting government audits; and that the organization has an appropriate internal quality control system in place and participates in an external quality control review program.

Auditor Qualifications

Audits of the UFR and audits conducted in accordance with the audit provisions of OMB Circular A-133 must be conducted by Independent auditors. Independent Auditor means:

(1) A federal, state, or local government auditor who meets the standards specified in the Standards for Audit of Governmental Organizations, Programs, Activities and

Functions ("Government Auditing Standards" or "Yellow Book") promulgated by the Comptroller General of the United States; or

(2) A public accountant who meets such standards. The public accountants engaged to conduct audits must be: (a) licensed certified public accountants or persons working for a licensed certified public accounting firm; or (b) public accountants licensed on or before December 31, 1970, or persons working for a public accounting firm licensed on or before December 31, 1970.

Accountants and accounting firms meeting these licensing requirements must also comply with applicable provisions of the public accountancy law and rules of the jurisdiction(s) where the audit is being conducted and the jurisdiction(s) in which they are licensed. Public accountants and accounting firms engaged to conduct audits in Massachusetts must be licensed by the Commonwealth of Massachusetts. The preliminary UFR review procedures employed by DPS include a review for compliance with the above provisions.

Federal Single Audit OMB Circular A-133:

Providers that are subject to the UFR filing provisions (as noted in "Who Must File?" above) and receive in excess of $25,000 of federal funds in aggregate from agencies of the Commonwealth for the delivery of social service programs are subject to the audit provisions of federal OMB Circular A-133, "Audits of Institutions of Higher Education and Other Nonprofit Organizations." Organizations that are social service subrecipients of the Commonwealth because they deliver social service programs, financed with federal assistance, are required to file an agencywide single audit or program-specific audit in accordance with the audit provisions of federal OMB Circular A-133. Agencies of the Commonwealth that are recipients of federal assistance and furnish federal assistance for social service programs to providers are as follows:

- Agencies of the Executive Office of Health and Human Services (see list on page 87)
- Executive Office of Elder Affairs
- Executive Office of Communities and Development
- Department of Corrections
- Department of Education
- The Parole Board

Agencywide Single Audit:

The basic financial statements of the UFR must be utilized to meet the single audit requirements of federal OMB Circular A-133 if the provider is subject to such audit provisions because of the receipt of pass-through federal assistance for social service programs from the Commonwealth.

Use of the UFR for federal, single audit activity requires that the audit meet the additional requirements of federal OMB Circular A-133. These requirements include a written report on compliance with laws and regulations that may have a direct and material effect on each major federal program; a report on the internal control structure that identifies internal controls, which provide reasonable assurance that federal awards are being managed in compliance with laws and regulations; a schedule of federal awards and an auditor's report on the schedule. The independent auditor is strongly urged to consult the AICPA Statement of Position 92-9 "Audits of Not-for-Profit Organizations Receiving Federal Awards" for guidance concerning the reporting requirements of OMB Circular A-133 and combined reporting.

Program-Specific Audit:

Providers that are exempt from filing the UFR but are subject to the program-specific audit provisions of OMB Circular A-133 are not required to utilize the UFR if they elect to have a program-specific audit conducted. Organizations that elect to have an OMB Circular A-133 agencywide single audit conducted must utilize the basic financial statements of the UFR.

Providers that are not exempt from filing a UFR but are subject to the program-specific audit provisions of OMB Circular A-133 must file the UFR and meet any additional requirements associated with the program-specific audit.

Program-specific audit provisions of OMB Circular A-133 mandate that the financial statements are prepared and the audit is conducted in accordance with the federal audit guide for the specific program or in accordance with procedures prescribed by the federal grantor agency.

OMB Circular A-133 Audit Requirements Based on Awards Received:

1. Nonprofit institutions that receive $100,000 or more a year in Federal Awards shall have an audit made in accordance with the audit provisions of OMB Circular A-133. However, nonprofit institutions receiving $100,000 or more, but receiving awards under only one program, have the option of having an audit of their

institution prepared in accordance with the audit provisions of OMB Circular A-133 or having an audit made of the one program. For prior or subsequent years, when an institution has only loan guarantees or outstanding loans that were made previously, the institution may be required to conduct audits for those programs, in accordance with regulations of the Federal agencies providing those guarantees or loans.

2. Nonprofit institutions that receive at least $25,000 but less than $100,000 a year in Federal awards shall have an audit made in accordance with OMB Circular A-133 or have an audit made of each Federal award, in accordance with Federal laws and regulations governing the programs in which they participate.

3. Nonprofit institutions receiving less than $25,000 a year in Federal awards are exempt from Federal requirements, but records must be available for review by appropriate officials of the Federal grantor agency or subgranting entity.

Providers should review the payment box on the cover page of each standard service contract for social services to determine if the contract was federally funded. The contract may be considered totally federally funded if a Catalog of Federal Financial Assistance (CFDA) Number has been entered in the box without modifying language concerning match requirements being included in the box or in a separate letter. Preparers should apply the matching information provided in the payment box or in the separate letter to the revenues received from the Commonwealth contract to compute the total amount of federal assistance provided by that contract.

Independent auditors and UFR preparers are strongly urged to consult and review the President's Office of Management and Budget OMB Circular A-133 "Audits of Institutions of Higher Education and Other Nonprofit Institutions", "President's Council on Integrity and Efficiency Position Statement No. 6 Questions and Answers on OMB Circular A-133" and the AICPA Statement of Position 92-9 (SOP 92-9) "Audits of Not-for-Profit Organizations Receiving Federal Awards" prior to preparing or auditing financial statements subject to the provisions of OMB Circular A-133.

Lotus UFR Template Submission:

Providers that have been furnished with a template by DPS must return the completed template **together with a paper copy** of the UFR to DPS. Revised templates for FY '93 have been developed for this purpose and can be obtained by contacting the Division of Purchased Services.

Typed or Computer-Generated Submission:

The Uniform Financial Statements and Independent Auditor's Report must be submitted in a typed or computer-generated fashion to facilitate the optical scanning of report information and for data entry purposes. Handwritten documents will be deemed not received or improperly prepared and the document will have to be resubmitted.

Organizational Changes:

Provider organizations that have changed names, merged or consolidated must provide the Division of Purchased Services (DPS) with a copy of amended or restated Articles of Organization prior to using a new name when filing the UFR. In addition, charitable organizations that vote to close affairs must forward to DPS a copy of the petition for dissolution that has been approved by the supreme judicial court. Nonprofit, noncharitable organizations and for-profit organizations that vote to close affairs must forward a copy of notification from the Office of The Secretary of State of the entry of a decree for dissolution with the supreme judicial court or superior court. Provider organizations must furnish DPS with the above-noted dissolution documentation before a determination can be made that the provider is no longer subject to UFR filing requirements.

When to File:

A properly completed Uniform Financial Statements and Independent Auditor's Report or exemption documentation must be submitted on or before the 15th day of the fifth month after the close of the provider organization's fiscal year. For example, if your fiscal year ends June 30, the Report must be filed on or before November 15 of that year. The Division of Purchased Services may, for cause, grant one extension of the filing deadline upon written request by the provider. Such requests for an extension must be received by the Division prior to the original due date.

Effective Date:

The 6/30/93 version of the Uniform Financial Statements and Independent Auditor's Report and its instructions are effective for agencies noted in the Who Must File? paragraph above that have fiscal years ending on June 30, 1993 or prior to the end of the State Fiscal Year ending June 30, 1994, and for other agencies receiving separate notification to file during this period.

Where to File:

A copy of a properly prepared Uniform Financial Statements and Independent Auditor's Report or UFR cover page and Exemption documentation, in accordance with these instructions, should be mailed or delivered to your organization's state principal purchasing agency (PPA, list of addresses attached) and the original UFR and Lotus template, if provided by DPS, must be filed with DPS at the following address:

The Commonwealth of Massachusetts
Executive Office for Administration and Finance
Division of Purchased Services
Bureau of Audit
One Ashburton Place, Room 1017
Boston, Massachusetts 02108

Exceptions/Exemptions

Your organization may be relieved of some or all of the filing requirements under the following exemptions:

(Note that certain of these exemptions as numbered below may not be available in future years.)

1. Filers of the Uniform Financial Statements and Independent Auditor's Report must meet all other federal and state governmental reporting and filing requirements and deadlines, including those of the Attorney General's Public Charities Division. The federal single audit provisions of OMB Circular A-133, as noted on pages 5, 6 and 7 of this document, apply to all of the exceptions and exemptions noted below.

2. If your agency is not a Chapter 766 school as noted above, during your organization's reporting year, and the agency had gross revenues less than $100,000 from all sources, it need not file the UFR. A completed cover page and a copy of an IRS 990 or the Attorney General's form PC must be submitted as evidence of exemption.

   This exemption does not apply to providers that are subject to the single audit provisions of OMB Circular A-133 by virtue of the fact that the agency has received federal financial assistance for social service programs from the Commonwealth.

3. If during your nonprofit organization's reporting year the agency had gross revenues equal to or greater than $100,000 but less than $250,000 from all sources, an accountant's report on reviewed financial statements prepared by an independent auditor in accordance with AICPA Statements on Standards for Accounting and Review Services, Nos. 1 and 2, is acceptable in lieu of an Independent Auditor's Report that expresses an opinion in accordance with generally accepted auditing standards and the additional requirements of GAGAS. The agency must also submit under the same cover (accountant-submitted) all financial statements and schedules as contained in the UFR. This provision does not apply to "for-profit" organizations.

   This exemption does not apply to providers that are subject to the single audit provisions of OMB Circular A-133 by virtue of the fact that the agency has received federal financial assistance for social service programs from the Commonwealth.

4. If your organization is a governmental agency or subdivision such as a municipality or consortium of municipalities, it is exempt from filing the Report. A completed cover page must be submitted as evidence of exemption. Governmental agencies that are subject to the federal audit provisions of OMB Circular A-128 by virtue of the fact that the agency has received federal financial assistance for social service programs from the Commonwealth must file an audit conducted in accordance with those audit provisions.

5. If your organization is a taxable "for-profit" entity that had gross revenues in excess of $100,000 from all sources, it must complete and submit a cover page, financial statements prepared in accordance with generally accepted accounting principles (GAAP) for the industry it operates in and must be audited in accordance with GAGAS. The basic financial statements and all unaudited supplemental schedules and information of the UFR must be filed as auditor-submitted documents with appropriate reference made in the Auditor's Report on the basic financial statements or in a separate report under the same cover. Agencies with gross revenues less than $100,000 from all sources must submit a cover page and a copy of their IRS tax return as evidence of exemption. **Note: The basic financial statements of the UFR must not be utilized by for-profit organizations.**

6. If your organization only operates programs outside Massachusetts and does not serve Massachusetts Chapter 766 clients, and the total number of Massachusetts clients in each program is less than twenty-five percent (25%) of that program's annual capacity as noted above, your organization is not required to file this Report. A completed cover page must be submitted as evidence of exemption.

   This exemption does not apply to providers that are subject to the single audit provisions of OMB Circular A-133 by virtue of the fact that the agency has received federal financial assistance for social service programs from the Commonwealth.

7. The following exemptions and exceptions apply only to Chapter 766 approved schools:

   A. If your organization is operating only a Chapter 766 approved school outside of the Commonwealth and the Commonwealth-funded students represent fewer than twenty-five percent (25%) of your total school enrollment as noted above, your organization is not required to file this Report. A completed cover page must be submitted for exemption.

B. If your organization is operating only a Chapter 766 approved school outside of the Commonwealth and Commonwealth-funded students represent over twenty-five percent (25%) of your total enrollment as noted above, a completed cover page and financial statements prepared by an independent auditor in accordance with generally accepted accounting principles (GAAP) must be submitted for exemption.

This exemption does not apply to providers that are subject to the single audit provisions of OMB Circular A-133 by virtue of the fact that the agency has received federal financial assistance for social service programs from the Commonwealth.

8. If your organization is not a Chapter 766 school and is required to file a Report with any bureau of the Rate Setting Commission this year which encompasses total organizational expenses, as noted above, your organization is exempt. A completed cover and certification page containing the type of report filed must be submitted as evidence of exemption. Qualifying Rate Setting Commission Reports include the following:

   A. Bureau of Ambulatory Care (Psychiatric Day Treatment, Home Health Agencies, Mental Health Centers, Independent Living, Adult Day Health)
   B. Hospital Bureau (403)
   C. Bureau of Long-Term Care (ICFMR-3)

   This exemption does not apply to providers that are subject to the single audit provisions of OMB Circular A-133 by virtue of the fact that the agency has received federal financial assistance for social service programs from the Commonwealth.

9. The following exemption applies to all providers, including Chapter 766 approved schools:

   If during your organization's reporting year the revenues received from the Commonwealth, cities and towns for social service programs was less than $100,000 and the Commonwealth revenues represented less than fifty percent (50%) of your organization's total gross revenues from all sources, your organization is exempt from filing this report. A completed cover page and documentation to support the exemption must be submitted. Acceptable documentation includes the following: Financial statements prepared and audited in accordance with GAAP and GAAS or an accountant's report on reviewed financial statements prepared by an independent auditor in accordance with AICPA Statements on Standards for Accounting and Review Services, Nos. 1 and 2, if your agency meets the requirements of exemption number three (3) above, which itemizes revenue from the Commonwealth, or other reliable documentation such as a federal tax return or Form PC.

This exemption does not apply to providers that are subject to the single audit provisions of OMB Circular A-133 by virtue of the fact that the agency has received federal financial assistance for social service programs from the Commonwealth.

10. Area Agencies on Aging that are not a Home Care Corporation and qualify for exemption number 9 above are not required to file this Report for agency fiscal years ending at anytime during calendar year 1993.

    Homemaker Organizations that do not provide social services directly to agencies of the Commonwealth will receive filing guidance at a later date during this filing year. Homemaker organizations that provide social services directly to agencies of the Commonwealth should observe the UFR filing requirements contained in these instructions for social service providers.

    These exemptions do not apply to providers that are subject to the single audit provisions of OMB Circular A-133 by virtue of the fact that the agency has received federal financial assistance for social service programs from the Commonwealth.

11. Nonprofit and for-profit chapters, affiliates or subsidiaries that are controlled and have interlocking operations and finances with a national organization may submit consolidated basic financial statements prepared and audited in accordance with GAAP and GAAS. The basic financial statements must be filed with all unaudited supplemental schedules and information of the UFR for the chapter or affiliate organization as auditor-submitted documents with appropriate reference made in the Auditor's Report on the basic financial statements or in a separate report under the same cover.

    This exemption does not apply to providers that are subject to the single audit provisions of OMB Circular A-133 by virtue of the fact that the agency has received federal financial assistance for social service programs from the Commonwealth.

12. Providers, other than chapters or affiliates of national organizations, which are affiliated and controlled or control other organizations, must file consolidated basic financial statements prepared and audited in accordance with GAGAS and unaudited supplemental schedules and information of the UFR for the chapter or affiliate organization as auditor-submitted documents with appropriate reference made in the Auditor's Report on the basic financial statements or in a separate report under the same cover. The UFR must be utilized for filing of

consolidated basic financial statements by all filers, except as noted above in 11, and for for-profit organizations.

Consolidated financial statements must be filed if all of the other organizations that your agency controls, or is controlled by, hold a similar tax status (nonprofit or for-profit) and are organized for the same or similar purposes and if any of the following conditions exist:

A. Your agency joins with any other organization in the registration or annual filing with any regulatory body or the Internal Revenue Service;

B. your organization is not independently controlled by its own elected board or there is a requirement for expenses to be approved by other organizations;

C. expenses of your organization are arbitrarily paid by other organizations and excluded from your accounts, or expenses of other organizations are arbitrarily paid by your organization and excluded from the other organization accounts.

Note: See Chapter 7, Associated Organizations, Independently Governed and Consolidated or Combined Affiliates sections, pages 34 and 35 of the AICPA Industry Audit Guide Audits of Voluntary Health and Welfare Organizations for further guidance.

13. If your organization's fiscal year has changed during this filing period, your organization is exempt from filing as follows:

- The basic financial statements of the UFR may be filed for the financial activity that occurred during the period of less than twelve months between the end of the old fiscal year and the beginning of the new fiscal year.

- An accountant's report on reviewed UFR basic financial statements prepared by an independent auditor in accordance with AICPA Statements on Standards for Accounting and Review Services, Nos. 1 and 2, is acceptable in lieu of an Independent Auditor's Report that expresses an opinion in accordance with generally accepted auditing standards and the additional requirements of GAGAS. The agency must also submit all unaudited supplemental schedules and information of the UFR as auditor-submitted documents with appropriate reference made in the Accountant's Report on the basic financial statements or in a separate report under the same cover.

This exemption does not apply to providers that are subject to the single audit provisions of OMB Circular A-133 by virtue of the fact that the agency has received federal financial assistance for social service programs from the Commonwealth.

14. If this is your organization's first year of contracting with the Commonwealth, and a full fiscal year of financial activity has not occurred during this filing period, your organization is exempt from filing as follows:

    - The basic financial statements of the UFR may be filed for the financial activity that occurred during the period of less than twelve months between the time your organization began contracting with the Commonwealth during this filing year and the end of your fiscal year.

    - An accountant's report on reviewed UFR basic financial statements prepared by an independent auditor in accordance with AICPA Statements on Standards for Accounting and Review Services, Nos. 1 and 2, is acceptable in lieu of an Independent Auditor's Report that expresses an opinion in accordance with generally accepted auditing standards and the additional requirements of GAGAS. The agency must also submit all unaudited supplemental schedules and information of the UFR as auditor-submitted documents with appropriate reference made in the Accountant's Report on the basic financial statements or in a separate report under the same cover.

    This exemption does not apply to providers that are subject to the single audit provisions of OMB Circular A-133 by virtue of the fact that the agency has received federal financial assistance for social service programs from the Commonwealth.

KEY CONCEPT

RESPONSIBILITIES OF INDEPENDENT AUDITOR AND MANAGEMENT FOR THE ORGANIZATION'S FINANCIAL STATEMENT

The American Institute of Certified Public Accountants has issued various statements on auditing standards (SAS) which clarify the responsibilities of the auditor and the management of the organization for the financial statements. These statements include SAS No. 26; SAS No. 29; SAS No. 32; SAS No. 35 and SAS No. 58.

Financial statements of most tax-exempt provider entities are composed of basic financial statements and supplemental financial statements, schedules and information.

Some financial statements and information are subject to the auditor's examination and expression of opinion and others are not, as follow:

- Basic financial statements for tax-exempt provider organizations which are subject to the expression of the auditor's opinion are listed in the first paragraph of the Independent Auditor's Report. These basic financial statements generally consist of the balance sheet, statements of revenues, expenses and changes in fund balances, and functional expenses.

- Other presentations that are identified as being part of the basic financial statements are subject to the expression of the auditor's opinion. These presentations, offered in conjunction with the basic financial statements, include descriptions of accounting policies, notes to financial statements, and schedules and explanatory material.

- The auditor has no obligation to apply auditing procedures to supplemental financial statements, schedules, and information accompanying the basic financial statements which the auditor is not engaged to report on. The auditor's responsibility with respect to other information in a document does not extend beyond the financial statements identified in his/her report, and the auditor has no obligation to perform procedures to corroborate other information contained in a document. However, the auditor may choose to modify or redirect certain of the procedures to be applied in the audit of the basic financial statements so that he/she may express an opinion on the accompanying information.

Management responsibilities for the financial statements are as follow:

- Although the auditor may participate in the preparation of financial statements, the statements are representations of management, and the fairness of the financial statements' presentation in conformity with generally accepted accounting principles (GAAP) is management's responsibility. In summary, management is responsible for the preparation and fairness of all the financial statements, notes to financial statements and schedules.

The auditor's responsibilities for the financial statements are as follow:

- The auditor's responsibility is to audit and express an opinion on certain of the basic financial statements that are considered necessary for presentation of financial position and the results of operations and changes in fund balances in conformity with GAAP.

- If management omits from the financial statements, including the accompanying notes, information that is required by generally accepted accounting principles, the auditor should express a qualified or an adverse opinion and should provide information in his/her report, if practicable, unless its omission from the auditor's report is recognized as appropriate by a specific SAS. In this context, practicable means that the information is reasonably obtainable from management's accounts and records, and the providing of the information in his/her report does not require the auditor to assume the position of a preparer of the financial information.

- When an auditor submits a document containing audited financial statements to his/her client or others, he/she has a responsibility to report on all the information included in the document. The auditor's responsibility with respect to information in a document does not extend beyond the financial information identified in his/her auditor's report, which usually includes supplemental financial statements, schedules and information. However, he/she should read the other information and consider whether such information or the manner of its presentation is materially inconsistent with information, or the manner of its presentation, appearing in the basic financial statements.

If the auditor concludes, on the basis of facts known to him, that any accompanying information is materially misstated in relation to the basic financial statements taken as a whole, he/she should discuss the matter with the client and propose appropriate revision of the accompanying information. If the client will not agree to a revision of the accompanying information, the auditor should either modify his report, describe the misstatement or refuse to include the information or the use of his auditor's report in the document, or withdraw from the engagement, depending on the particular circumstances and the significance of the inconsistency in the other information.

Additional general advise to the independent auditor appears in the auditing guidelines' section.

PROGRAM SERVICE

A program is the integrated and coordinated delivery of a mix of services designed to assist clients in achieving a common objective, alleviate a common problem or meet a common need. For instance, a mental retardation program for supported employment that is designed to help clients obtain employment may consist of counseling services, case management services, certain job search activities and medical services. In order to properly complete the Report, it is essential that the preparer understand that program cost information is used to develop program prices.

A common error in preparing this form is to separately report the costs associated with each contract rather than the costs associated with each program. Reporting contract costs is correct only when the program budget documents of the negotiated unit rate or cost reimbursement contract clearly indicates that all contract program costs will be defrayed by funding derived from the following:

- A single Commonwealth purchasing agency;
- Budget offsets; and by
- private purchasers;

and that the sole Commonwealth purchasing agency and the other private purchasers will purchase the program's entire capacity.

Program budget offsets are derived from the provider's unrestricted or restricted funds, payments from state purchasing agencies and medicaid for services purchased using the Rate Setting Commission's established medicaid eligible class rates and revenues from private sources such as the United Way. Negotiated unit rate and cost reimbursement contracts may not be used for program budget offsets.

Frequently, however, several Commonwealth and private purchasers will acquire the services of a single program (each contract may have different maximum obligations but they will all utilize the same attachment B program budget and will have identical unit rates) through separate contracts (program budget may have class rate offsets) that are all assigned the same program number. A program budget may never be supported by funding derived from multiple cost reimbursement contracts or a combination of negotiated unit rate contracts and cost reimbursement contracts. Each program budget that has multiple contracts associated with it is assigned a program number by the provider

that appears on the service contract cover page and the attachment B program budget. The same program number that has been assigned by the provider on these separate documents must be utilized for reporting program activity in the UFR.

Another common error is to report the costs associated with broad program categories that sometimes have the same MMARS program code - such as all residential services, all mental health services or all sheltered workshop services - as a single amount rather than distinguishing the individually purchased and priced programs that have separate program numbers and rates assigned to their respective service contracts covering these broad categories. These programs often require a different mix of services to accommodate client needs (clients located in urban areas may need to learn how to use public transportation) because they are operated in different regions of the Commonwealth.

In the case of programs purchased by the Executive Office of Health and Human Services (EOHHS) or any of its agencies/departments, the identification of programs is simplified by the attachment to the instructions, which lists each type of program purchased by EOHHS agencies and corresponding MMARS program codes.

FULL-TIME EQUIVALENTS (FTEs)

FTEs are a method of measuring the amount of time that a part-time employee works in terms of a full-time equivalent holding a comparable job. If 40 hours a week defines a full week, then 40 hours of combined part-time work for a given position is 1.00 FTE and 20 hours is .5 FTE.

FTEs should be reported in annual terms so that a full-time person hired at midyear would be recorded as .5 FTE. Of course, you may have a person working less than 1.00 FTE on an annual basis. If an employee's work crosses two or more job categories within one program/cost center (i.e., supervision and direct care), reported FTE time should be split accordingly. In either case, FTEs and wages must reconcile so that an employee reported as working .65 FTE (26 hours) shows a salary of sixty-five percent (65%) of a full-time annual salary.

Required FTE Reporting By Program. FTEs for total Agency and Support Services (Administration, Fund-raising and Non Program) columns must be reported on Supplemental Employee Schedule C. Reporting of FTEs for program columns is optional for all providers except as noted. FTEs must be reported for all Chapter 766 rate programs. Reporting of FTEs for all other programs is not required but is recommended when FTE information is readily available from payroll records.

SERVICE UNIT

The service unit is the standard, measurable unit of program activity or performance determined by the purchasing governmental unit in programs from which the Commonwealth purchases services. The service unit may be a time unit, as in the case of an hour of counseling or a residential day; or the completion of a prescribed procedure such as a client evaluation or any other measurable unit of service. The reservation of all or a portion of a program's operational capacity for governmental unit's exclusive use, whether or not the capacity is in fact utilized, may constitute a unit of service. Not all programs have a single product, however. Methadone maintenance programs, for example, provide two services: one is the distribution of methadone, the other is a counseling hour. There are, consequently, two service unit types and two cost centers. Generally, however, a program will produce a single product or service unit.

A program/cost center may have service units even though it is purchased on a cost reimbursement basis. In such a case, the units of service must be reported.

INSTRUCTIONS TO THE PREPARER

GENERAL INSTRUCTIONS

1. Please read all instructions carefully, including the Account Definitions and the Program Components appendix, before preparing the report.

2. All entries must be typewritten or computer-generated.

3. Enter the provider organization's legal name, Massachusetts Vendor Code Number (Federal Employer Identification Number (FEIN) plus additional numbers), Attorney General's Public Charities Account Number and date of fiscal year end where indicated at the top of each page (see Instructions to the Cover Page for further information).

4. The basic financial statements must be completed in accordance with generally accepted accounting principles (GAAP), including the accrual basis (not cash basis) of accounting. Supplemental schedules must also be completed in accordance with (GAAP) except where a more restrictive accounting treatment is specifically required by the Account Definitions.

5. The preparer should complete only those schedules, columns and line items which are applicable. For example, a provider organization which is not required to maintain a fund accounting system and which has no restricted funds to report, needs to complete only the All Funds columns on the Balance Sheet and the Statement of Revenues, Expenses and Changes in Fund Balances. Similarly, a provider organization which does not provide client transportation need not complete line 19 on the supplemental expense schedule. Please write "N.A." if a schedule, column or line is not applicable to the provider organization.

6. All amounts should be shown in WHOLE dollars, rounded to the nearest dollar.

7. All subtotals and totals must be calculated and entered (See FTE exception in Key Concepts section). Note that on some statements/schedules, the individual items, subtotals and totals are all entered in the same column. Where this is the case, care must be taken not to double count.

8. Brackets, ( ), indicate negative amounts or subtraction.

9. XXXXXXXX indicate that no amounts should be entered.

10. Asterisks, (*), indicate amounts which must reconcile with the same item appearing on another statement/schedule.

11. Items marked by a t must reconcile to amounts with the same account title on the Statement of Functional Expenses' Totals column.

12. Program numbers entered on the individual statements/schedules must coincide with the program numbers entered on the cover page and with contract program numbers on contracts.

13. Where information is sought for specific programs and the form does not provide enough columns to enter information for all the provider organization's programs, additional copies of the form should be photocopied, numbered consecutively in the upper right hand corner and attached.

14. All attachments should be clearly marked to indicate the schedule, column and line item to which they refer.

15. Preparers are encouraged to footnote or add information to the Notes to the Financial Statements for activities or transactions needing more explanation or detail for presentation purposes.

16. Whenever the term "OTHER" is used, the preparer should list separately, in the space provided or in an attachment, the amount and brief description of all items which are material in relation to the financial statement.

17. The independent auditor reports should be completed only by the independent auditor. Separate guidance for independent auditors is provided in the auditing guidelines' section.

18. Generally, it is easier to complete the Report and avoid errors in reconciling schedules/statements by starting, after the numbers are finalized by the independent auditor, with the cover page, then the supplemental schedules and finally the financial statements.

19. Independent auditors are strongly encouraged to review the guidance and publications noted in the auditing guidelines' section of these instructions prior to beginning the audit.

20. Retain a copy of the completed form for your files.

21. Questions concerning the proper completion of the Report may be addressed to the attention of the Bureau of Audit at the following address:

The Commonwealth of Massachusetts
Executive Office for Administration and Finance
Division of Purchased Services
Bureau of Audit
One Ashburton Place, Room 1017
Boston, Massachusetts 02108
Phone: (617) 727-7500

OVERVIEW OF THE REPORT AND PAGE-BY-PAGE INSTRUCTIONS

COVER PAGE

The cover page is completed by the operating agency and captures basic identifying information about the provider and its programs, such as: reporting year, corporation name, address, Commonwealth vendor code number, MMARS program code found on each service contract and Organization Type Code: C. Corporation, T. Trust, U. Unincorporated Association, P. Partnership, S. Sole Proprietorship, etc.

Report for the Fiscal Year Ended. In the space provided, enter the closing date of the agency's fiscal year for which this Report is prepared.

Disc Filed. Indicates if in addition to the paper copy of the Uniform Financial Statements and Independent Auditor's Report a Lotus disc was filed using the free Lotus template provided by DPS.

Provider Organization. Enter the name of the provider organization as it appears in the Articles of Organization or IRS form 941/941E.

Doing Business As. If the provider organization conducts its business using a name other than the legal name given above, or is commonly known by a name other than the name given above, also enter the "doing business as" or "d/b/a" name. Program name should not be entered here.

Business Address. The address of the provider organization's administrative offices.

Contact. The person preparing the report, or the person who may be contacted if questions arise regarding the report. Include the person's title and phone number.

CPA. Name of public accounting firm engaged to assist in the preparation and/or audit or review the Uniform Financial Statements and Independent Auditor's Report.

Management Company Name. Name of management company engaged to prepare the Uniform Financial Statements (Basic and Supplemental Financial Statements and Schedules) or retained to perform administrative functions of the provider organization.

Organization Type Code.

Corporation - C
Trust - T
Unincorporated Association - U
Partnership - P
Sole Proprietor - S
Other - O

If Other, Enter Type. Self-explanatory.

Date of Org./Incorp. Date organization was established or Incorporated (MM/DD/YY).

Federal Income Tax Exemption? Has the organization received a written exemption from federal income tax? If under a section other than 501 (c) (3), enter IRS section number.

Has this Report been audited? Except as provided in the Exceptions/Exemptions section, all basic financial statements must be subject to an independent audit.

Exception/Exemptions. If an exemption or exception is applicable, other than number 1, enter the number of the paragraph of the Exceptions/Exemptions section of these Instructions under which an exemption is to be granted (e.g., Enter "3" for gross revenues between $100,000 and $250,000). For exemptions under any subparagraph, also enter subparagraph letter (e.g., 8a, 8b, etc.)

Principal Purchasing Agency Name. All provider organizations that contract with the Executive Office of Health and Human Services (EOHHS), Executive Office of Elder Affairs (EOEA), Department of Education (DOE), Parole Board, Department of Corrections (DOC), City, Town, or any of the EOHHS agencies (see Supplemental Schedule A of the Report for a listing) have been assigned to a single EOHHS agency EOEA, DOE, the Parole Board, the Department of Corrections, City, or Town for prequalification to contract or audit resolution. If your assigned principal purchasing agency (PPA) is not known and you contract with an EOHHS agency, contact EOHHS' Office of Purchased Services, 727-7600. If your organization did not provide services to an EOHHS agency, contact EOEA, the Parole Board, the Department of Corrections or DOE.

Program Information. For each program (as defined in Key Concepts) operated by your organization, enter in the space provided a sequential number, name by which the program is commonly known, address(es) at which the program is conducted, the type of program or brief description, and, in the case of programs purchased by the Executive Office of Health and Human Services or any of its departments and/or agencies, the MMARS program code found on each Service contract. A current

listing of MMARS program codes is included as an attachment to these instructions. If a program's services are purchased by more than one EOHHS department/agency, include all applicable codes. Programs with more than one cost center should be numbered 1a, 1b, etc. Refer to General Instructions, subparagraph 12 note on program numbering.

A FULLY COMPLETED COVER PAGE IS REQUIRED FOR ALL EXEMPTIONS

SEE KEY CONCEPTS FOR IN-DEPTH INFORMATION CONCERNING INDEPENDENT AUDITOR AND MANAGEMENT FINANCIAL STATEMENT RESPONSIBILITIES

INDEPENDENT AUDITOR'S REPORT ON THE FINANCIAL STATEMENTS

The independent auditor must prepare this report, which either contains an expression of opinion regarding the financial statements, taken as a whole, or an assertion to the effect that an opinion cannot be expressed. When an overall opinion cannot be expressed, the reasons therefore should be stated. The report should contain a clear-cut indication of the character of the auditor's work and the degree of responsibility the auditor is taking.

Note: **The first supplemental reporting standard for government financial audits of GAGAS requires that a statement be included in the auditor's report that the audit was made in accordance with generally accepted government auditing standards.**

TO BE COMPLETED BY THE INDEPENDENT AUDITOR

Before rendering an opinion on the financial statements, the independent auditor should consult the Account Definitions' section of these instructions and the Program Components' appendix. In some cases, accounts have been defined more narrowly than GAAP accounting principles would require for commercial organizations.

The audit must be conducted in accordance with Generally Accepted Government Auditing Standards (GAGAS), which incorporates the AICPA standards for field work and reporting, and includes the additional standards for financial audits set forth in the Comptroller General of the United States' Government Auditing Standards - Standards for Audit of Governmental Organizations, Programs, Activities and Functions, (1988 Revision), also known as the "Yellow Book" (GAGAS). Also, the AICPA standards require that public accountants state that the audit was made in accordance with generally accepted auditing standards. The independent auditor should consult and follow the guidance of

the AICPA industry audit guide, Audits of Voluntary Health and Welfare Organizations (AVHW) in examining and reporting on financial statements of tax-exempt Provider organizations which receive funding from the Commonwealth under purchase-of-service contracts (POSCs) or cooperative funding agreements (CFAs). The general conditions of these contracts and agreements require that the tax-exempt provider organization's financial statements are examined and reported upon in accordance with the recommendations of this audit guide. The auditor's standard report must be addressed to the board of directors of the provider organization whose financial statements are being audited. The form of the auditor's report for an audit conducted in accordance with GAGAS on the financial statements (unqualified opinion) and Accountant's Review Report is as follows:

SAMPLE

Independent Auditor's Report on the Financial Statements

We have audited the accompanying balance sheet of X Company (a Massachusetts corporation, not-for-profit) as of June 30, 199X and the related statements of support, revenues, expenses and changes in fund balances, and of functional expenses for the year then ended. These financial statements are the responsibility of X Company's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with generally accepted auditing standards and Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of X Company as of June 30, 199X, and the results of its operations and changes in fund balances for the year then ended, in conformity with generally accepted accounting principles.

Our audits were made for the purpose of forming an opinion on the basic financial statements taken as a whole. The supplementary information included in Schedules A, B, C, D and

B-1 is presented solely for purposes of additional analysis and is not a required part of the basic financial statements. Such information is the representation of X Company's management and has not been subjected to the auditing procedures applied in the audit of the basic financial statements, and, accordingly, we do not express an opinion on it.

[Signature]

[Date]

Note: **Independent auditors should consult the "Yellow Book" and the publications listed in the auditing guidelines' section of these instructions prior to conducting the audit and reporting on internal controls. DPS strongly encourages independent auditors to consult the AICPA Statement of Position 92-9 "Audits of Not-for-Profit Organizations Receiving Federal Awards" prior to conducting and reporting on a single audit performed in accordance with OMB Circular A-133.**

Note: **The first supplemental reporting standard for government financial audits of GAGAS requires that a statement be included in the auditor's report that the audit was made in accordance with generally accepted government auditing standards. AICPA standards require that public accountants state that the audit was made in accordance with generally accepted auditing standards. In conducting government audits, public accountants should also state that their audit was conducted in accordance the standards set forth in chapters 3, 4, and 5 of the Government Auditing Standards.**

SAMPLE

Accountant's Review Report

We have reviewed the accompanying balance sheet of X Company as of June 30, 199X, and the related statements of revenues, expenses and changes in fund balances, and functional expenses for the year then ended in accordance with standards established by the American Institute of Certified Public Accountants. All information included in these financial statements is the representation of the management of X Company.

A review consists principally of inquires of company personnel and analytical procedures applied to financial data. It is substantially less in scope than an examination in accordance with generally accepted auditing standards, the objective of which is the expression of an opinion regarding the financial statements taken as a whole. Accordingly, we do not express such an opinion.

Based on our review, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in conformity with generally accepted accounting principles.

Our review was made for the purpose of expressing limited assurance that there are no material modifications that should be made to the financial statements in order for them to be in conformity with generally accepted accounting principles. The supplementary information included in Schedules A, B, C, D and B-1 is presented only for supplementary analysis purposes. Such information has not been subjected to the inquiry and analytical procedures applied in the review of the basic financial statements, but was compiled from information of management, without audit or review. Accordingly, we do not express an opinion or any other form of assurance on the supplementary information.

[Signature]

[Date]

AUDITED BASIC FINANCIAL STATEMENTS

The basic financial statements are representations of the provider organization's management, and the fairness of the financial statements presentation in conformity with GAAP is management's responsibility. The independent auditor's responsibility is to express an opinion on the organization's basic financial statements, which has been based on the auditor's audit. The provider organization's management and the auditor may both participate in the preparation of the basic financial statements. Basic financial statements that are subject to the auditor's examination and expression of opinion in accordance with the AICPA Industry Audit Guide Audits of Voluntary Health and Welfare Organizations are as follow:

- o Balance Sheet
- o Statement of Revenues and Expenses and Changes in Fund Balances
- o Statement of Functional Expenses

NOTE: THE STATEMENT OF FUNCTIONAL EXPENSES IS CONSIDERED A BASIC FINANCIAL STATEMENT SUBJECT TO THE AUDITOR'S EXAMINATION AND EXPRESSION OF OPINION. SEE CHAPTER 1, PAGE 4, FINANCIAL STATEMENT CONSIDERATION SECTION OF THE AICPA INDUSTRY AUDIT GUIDE AUDITS OF VOLUNTARY HEALTH AND WELFARE ORGANIZATIONS (AVHW). THE STATEMENT IS NOT CONSIDERED AN OPTIONAL OR SUPPLEMENTAL STATEMENT. IN ADDITION, CHAPTER 7, PAGE 36, ILLUSTRATIVE AUDITORS REPORT SECTION STATES THE FOLLOWING:"

"IF THE FINANCIAL STATEMENTS DO NOT DISCLOSE THE FUNCTIONAL CLASSIFICATION OF EXPENDITURES, SUCH AS FUND-RAISING COSTS, THE INDEPENDENT AUDITOR'S OPINION SHOULD BE QUALIFIED."

BALANCE SHEET

ACCOUNT DEFINITIONS USED WITH BALANCE SHEET

Except as specifically defined below, or in referenced appendices or procurement regulations, all accounts, funds and functional centers used in the Report or these instructions are presumed to have generally accepted accounting definitions.

A. FUNDS

1.) Current Unrestricted Fund. Funds which have not been restricted to a specific use by their source. Funds which have been "restricted" or "designated" by the organization's governing body to a specific use are unrestricted for these purposes.

Note: Although alternative classifications ("Temporarily Restricted") have been proposed for certain Program Service Fees and Reimbursements, all Program Service Fees and Reimbursements are currently defined by procurement regulations and by the Philanthropic Giving Act as Unrestricted.

2.) Current Restricted Fund. Funds which have been restricted to a specific use by their donor and which are currently available for that use alone. This could include use of the funds to defray a specific cost, group of costs or for costs associated with a specific program or service. Program Service Fees and Reimbursements from the Commonwealth are not considered restricted funds because of the following: Provider organizations are reimbursed for program services and associated costs after the provider has utilized its revenues to provide the services. Organizations that provide program services to the Commonwealth must certify under penalties of perjury that services were rendered and costs were incurred in accordance with all applicable laws and regulations governing disbursements of public funds prior to being reimbursed. This mechanism differs from other methods of reimbursement which provide credit or cash prior to services being delivered or costs incurred.

3.) Endowment Fund. The principal amount of funds which have been restricted by their donor in such a way that the principal must be maintained intact in perpetuity or until the occurrence of a specified event, or for a specified period, and that only the income from the investment thereof may be expended either for general purposes or for purposes specified by the donor.

4.) Plant Fund. Fund used to accumulate the net investment in fixed assets, to account for funds contributed specifically to acquire, maintain or replace land, buildings or equipment, and to account for mortgages and other liabilities related to such assets.

5.) Other Funds. All other funds, such as custodian funds, for which the organization maintains a separate account.

Statement of Revenues, Expenses and Changes in Fund Balances

PLEASE REFER TO STATEMENT OF FUNCTIONAL EXPENSES
AND SUPPLEMENTAL SCHEDULES FOR ACCOUNT DEFINITIONS

Note: The amounts shown under the "TOTAL ALL FUNDS THIS YEAR" for certain line items (5, 6, 13-16) must reconcile with amounts shown under the same account title on other statements and supplemental schedules in this report.

Statement of Functional Expenses

The amounts shown under "TOTAL EXPENSES," line 7, must reconcile with the sum of lines 41, 43, and 44 in each column on Supplemental Schedule B. Programs shown under the program columns must coincide with the programs listed on the Cover Page and must satisfy the definition of Program given in Key Concepts.

Functional Classification of Expenses:

Providers and independent auditors must be particularly concerned with the manner in which expenditures are reported. Auditors and providers are required to conform with the guidance provided in the form of recommendations, concerning this issue in Chapter 6, Program and Supporting Services, of the AICPA industry audit guide Audits of Voluntary Health and Welfare Organizations. The Functional Classification of Expenses section of Chapter 6 states the following:

"A wide variety of persons and groups are interested in the reported expenses of voluntary health and welfare organizations. The first group to be considered is the organization's contributors, who have given money, services, or material. The second group represents the organization's trustees or directors, who have a fiduciary responsibility to conserve and expend its assets for the organization's stated objectives. The third interested group is the compensated executives of the organization, who have the responsibility of carrying out the stated policies of the organization's governing board. The fourth group is made up of those governmental jurisdictions that have authority to control charitable solicitations through legislation and the local, state, and federal government which grant tax exemptions to charitable organizations.

"Although each of these groups may be interested in information about particular types of expenses, the cost of providing various services or other activities is of greater importance and becomes apparent only when the expenditures are summarized on a "functional" basis.

The functional classifications used by most organizations include specific "program services" which describe the organization's social service activities, and "supporting services" under which management (or administrative) and general expenses and fund-raising costs are shown as separate items."

Expenditures for program services should be segregated from fund-raising and management and general expenditures, and the amount of each should be clearly disclosed in the financial statements.

Costs Which Pertain to Various Functions:
(Charging and Allocating Procedures)

Many organizations incur costs that apply to more than one functional purpose. In such cases, it may be necessary to allocate these costs among functions. Examples include salaries of those who perform more than one type of service, rental of a building used for various program services, and certain administration (the portion of salaries and expenses that are related to the direct supervision of a program or fund-raising activity rather than the overall direction of the organization) and fund-raising activities that can be specifically identified with a function.

Where employees perform duties that relate to more than one function, the salaries of such individuals, as well as all other expenses which pertain to more than one function, should be allocated to the separate functional categories, based on procedures that determine, as accurately as possible, the portion of the cost related to each function. In some cases, and particularly where most of an individual's time is spent on one function, estimates of the time spent on each function may be appropriate. However, in many cases the maintenance of employee time reports **(required by DPS General Conditions of the contract)** will be practical and will result in a more accurate determination of the costs attributed to each function (see sample page 39). In cases where the time of employees is spent on various functions and such functions do not vary significantly during each accounting period, the preparation of time reports for selected test periods during the year might be sufficient to determine the allocation of such costs to the related functions (see sample, page 40). In some cases, the degree of usage of these indirect costs can not be readily and specifically identified with each function.

A reasonable allocation of an organization's functional expenditures may be made on a variety of bases. The following allocation procedures are illustrative only, but use of these or similar procedures will ordinarily result in a reasonable allocation of an organization's multiple function expenditures:

1. A study of the organization's activities may be made at the start of each fiscal year to determine the best practicable

allocation methods. This study should include an evaluation of the preceding year's time records or activity reports of key personnel, the use of space, the consumption of supplies and postage, etc. The results of this study should be reviewed periodically and revised where necessary to reflect significant changes in the nature or level of the organization's current activities.

Note: Sample annual employee time allocation summary and activity records for conducting this study has been provided on pages 39 and 40.

2. Daily time and expense records may be kept by all employees who spend time on more than one function and may be used as a basis for allocating salaries and related costs. These records should indicate the nature of the activities in which the employee is involved.

Note: Sample daily time report sheet and activity record has been provided on pages 39 and 40.

3. Automobile and travel costs may be allocated on the basis of the expense or time reports of the employees involved.

4. Telephone expense may be allocated on the basis of use of the extensions, generally following the charge for the salary of the employee using the telephone, after making direct charges for toll calls or other service attributable to specific functions.

5. Stationery, supplies and postage costs may be allocated based on a study of their use.

6. Occupancy costs may be allocated on the basis of a factor determined from a study of the function of the personnel using the space involved.

7. The depreciation and rental of equipment may be allocated based on asset usage.

The guidance provided above has been excerpted from the AICPA Industry Audit Guide <u>Audits of Voluntary Health and Welfare Organizations</u>. See instructions for functional classification of expenses in the Account Definition's section and the Administration guidance noted above for other reporting and allocation requirements.

<u>Program and Supporting Services</u>:

1.) <u>Administration</u>. Administration and support (management and general) costs include expenditures

for the overall direction of the organization, general record keeping, business management, budgeting, general board activities and related purposes for meeting organizational goals and objectives. "Overall direction" includes the salaries and expenses of the chief officer of the organization and his or her staff. Expenses incurred in keeping a charitable organization's name before the public that are not directly related to program services or fund-raising should be classified as Administration. The cost of disseminating information to inform the public of the organization's "stewardship" of contributed funds, the publication of appointments and the annual report (financial statements) should likewise be classified as Administration.

Note: Administration expenditures for the overall direction of the organization, general record keeping, business management, budgeting, publication of appointments, audited financial statements, general board activities and related functions for meeting organizational goals and objectives such as informing the Public of the organization's "stewardship" of contributed funds, etc., must not be charged, prorated or allocated to fund-raising or programs, other than on line 42, Allocation of Administrative Expense of Supplemental Expense Schedule B, in accordance with AVHW audit guide requirements noted above.

When the salaries and expenses of the chief officer and his or her staff and other management costs are not related to the overall direction of the agency, they are not considered Administration costs.

If the chief officer and his or her staff spend a portion of their time <u>directly</u> supervising fund-raising or program service activities and their degree of usage can be readily and specifically identified, such salaries and expenses should be identified with those functions. Direct supervision of fund-raising or program services generally occurs in two different ways and should be reported in the following manner:

- <u>Direct Supervision of Fund-Raising or Program Director Activities</u>. The chief officer and his or her staff may directly supervise a director of fund-raising or a program director and the activities that are directly related to the specific duties and functions of fund-raising or the program. The salaries and expenses of the chief officer and his or her staff that are associated with this activity should be prorated among fund-raising and the programs receiving the direct support (not administration) by utilizing

the position titles of the chief officer and his or her staff. The time spent directly supervising the fund-raising or program director and the specific duties and functions receiving direct supervision must be documented by time sheets (see sample, page 39) or appointment calendars that reflect time spent on the activity and fund-raising or program outputs.

o Functioning as a Fund-Raising or Program Staff Person.

The chief officer and his or her staff may spend time directly supervising fund-raising or program activities by performing the duties of a staff person in the fund-raising or program activity and their degree of usage can readily and specifically be identified. The salaries and expenses of the chief officer and his or her staff that are associated with performing these duties should be prorated among fund-raising and the programs that receive the direct supervision. The position titles (e.g., program director) of the fund-raising activity or program and the type of expense incurred should be utilized for reporting these costs. These activities must not be reported as administration. The time spent performing the duties and functions of a fund-raising or program staff person must be documented by time sheets (see sample, page 39) that reflect time spent on the activity, and fund-raising or program outputs.

When the chief officer and his or her staff spend time directly supervising fund-raising or program activities by performing the duties of a staff person in the fund-raising activity or in numerous programs, and the degree of direct supervision and usage of their salaries and expenses can not be readily and specifically identified with each function, these costs are considered indirect fund-raising or program costs which pertain to various functions (not Administration). These indirect costs should be charged or allocated by using time sheets or a study conducted at least annually and revised periodically to reflect significant changes (see samples, pages 39 and 40) among those functions by position title (e.g., program director) or type of expense.

Note: A description of acceptable allocation methodologies and a sample of the sheet is provided in the Costs Which Pertain To Various Functions' section of these instructions for the Statement of Functional Expenses.

For further information consult Chapter 6 of the AICPA Industry Audit Guide Voluntary Health and Welfare Organizations.

2.) Fund-Raising. Activities associated with capital campaigns, solicitation of charitable donations, gifts and bequests, special events, volunteer programs, in-kind contributions, grant applications, etc. Does not include commercial activities carried on for the purpose of making a profit. These should be classified under Non-Program.

3.) Non-Program. Functions or activities which are not directly related to the organization's charitable purposes or social services program of purposes, such as the production of commercial products and services carried on primarily for profit. Note: Program services delivered to clients that were not publicly sponsored by the Commonwealth must not be classified as "non-Program."

4.) Program Services. As defined in the KEY CONCEPTS section. Note: The allocation of expenses to Program functional centers is restricted to items set forth in the PROGRAM COMPONENTS appendix. Items not included (e.g., administrative staff) may not be directly allocated to Program functional centers.

5.) Out-of-State. No MA Clients. Program services which are located outside the Commonwealth and which do not serve clients sponsored by public entities (e.g., state or municipal agencies) of the Commonwealth. Note: Applicable to Supplemental Revenue and Expense Schedules and Statement of Functional Expenses only.

PLEASE REFER TO SUPPLEMENTAL SCHEDULE B EXPENSES
FOR EXPENSE ACCOUNT DEFINITIONS

THE STATEMENT OF FUNCTIONAL EXPENSES IS CONSIDERED A BASIC FINANCIAL STATEMENT SUBJECT TO THE AUDITOR'S EXAMINATION AND EXPRESSION OF OPINION. SEE CHAPTER 1, PAGE 4, FINANCIAL STATEMENT CONSIDERATIONS' SECTION OF THE AICPA INDUSTRY AUDIT GUIDE, AUDITS OF VOLUNTARY HEALTH AND WELFARE ORGANIZATIONS (AVHW). THE STATEMENT IS NOT CONSIDERED AN OPTIONAL OR SUPPLEMENTAL STATEMENT. IN ADDITION, THE ILLUSTRATIVE AUDITOR'S REPORTS' SECTION OF CHAPTER 7, PAGE 36, STATES THE FOLLOWING:

"IF THE FINANCIAL STATEMENTS DO NOT DISCLOSE THE FUNCTIONAL CLASSIFICATION OF EXPENDITURES, SUCH AS FUND-RAISING COSTS, THE INDEPENDENT AUDITOR'S OPINION SHOULD BE QUALIFIED."

Caution

Methods for charging or allocating expenditures for the purpose of reporting expenses on the UFR that utilize budgeted or received revenues, budgeted costs and anticipated or received contract reimbursements rather than resource usage bases, as noted above, are not acceptable or in accordance with Generally Accepted Accounting Principles.

SAMPLE OF DAILY EMPLOYEE TIME REPORT SHEET

FAMILY SERVICE AGENCY OF UTOPIA, INC.

Name: J. W. Wilkens

Job Title: Director of Casework

Date: 1/7/X2

Description of Work Done	Function Benefited	Program Number	Number of Hours
Worked on the Development of a special project for adoption of "hard to place" children	Adoption	504	3
Assisted caseworkers in developing new foster homes.	Foster Home Care	506	2.5
Conducted staff seminar on new techniques in group counseling.	Counseling	512	2
Interviewed a caseworker to fill a professional staff vacancy.	Management & General	702	1.5
Attended a meeting with the executive on fund-raising issues.	Fund Raising	801	.5
	TOTAL HOURS WORKED		9.5

Gary K. Greely
Supervisor's Approval

SAMPLE OF ANNUAL EMPLOYEE TIME ALLOCATION SUMMARY

FAMILY SERVICE AGENCY OF UTOPIA, INC.

Name: J. W. Wilkens

Job Title: Director of Casework

Page 4

Week Beginning	Total Hours	Counseling	Adoption	Foster Home Care	Management & General	Fund Raising
10/29	40	18	4	12	6	0
11/5	42	23	2	11	4	2
11/12	38	15	0	16	2	5
11/19	45	11	9	8	3	14
11/26	44	13	7	13	5	6
12/3	38	10	2	19	5	2
12/10	43	18	3	16	6	0
12/17	50	29	0	14	2	5
12/24	28	2	2	20	4	0
Annual Hours	2080	890	196	710	180	104
Actual %	100	42.8	9.4	34.1	8.7	5.0
Estimated %	100	45.0	12.0	30.0	10.0	3.0
Difference	--	(2.2)	(2.6)	4.1	(1.3)	2.0

Notes to Financial Statements

A blank form has been provided for notes to the financial statements. Additional pages may be attached. Proper completion of the Uniform Financial Statements and Independent Auditor's Report does not require the preparer to include any matter on the blank form provided for Notes to Financial Statements beyond that which is required to be disclosed in accordance with GAAP, except as noted below:

The following presentations are considered part of the basic financial statements: descriptions of accounting policies, notes to financial statements, and schedules and explanatory material that are identified as being part of the basic financial statements.

Related Party Disclosures:

Provider organizations subject to UFR filing requirements must disclose related party relationships and transactions in the notes to the financial statements of the Uniform Financial Statements and Independent Auditor's Report (UFR), in accordance with guidance furnished in the DPS publication, Related Party Relationships and Disclosure Under 808 CMR 1.02. A copy of this document has been provided as an attachment to the UFR Auditor's Compliance Supplement for fiscal year 1993.

Providers that contract with the Commonwealth and file the UFR are audited in accordance with generally accepted government auditing standards (GAGAS) and are subject to various regulatory and contract provisions. In government audits and in the Purchase-of-Service system, the materiality level and threshold for related party disclosure is lower than in similar-type audits in the private sector because of the public accountability of the entity, the various legal and regulatory requirements, and the visibility and sensitivity of government programs, activities, and functions.

The following DPS related party disclosure guidance should be utilized for determining if disclosure is needed in the notes to the financial statements of the UFR:

- Programs and Supporting Services purchased by the Commonwealth:

  Generally, all related party relationships or transactions as defined by 808 CMR 1.02 that are associated with programs purchased by the Commonwealth (state agencies and local education authorities) are considered material and must be disclosed in the UFR notes to the financial statements. Two exceptions to

this consideration may, to the extent allowed by the qualitative materiality factors of GAGAS, include the following:

. Individual or aggregated monetary related party transactions of less than one hundred dollars ($100) where the amount was defrayed by funds not derived from the Commonwealth.

. Gifts furnished to the provider by an official, administrator or manager of the provider.

The sensitive nature of Commonwealth-purchased programs and the penalties and sanctions associated with failure to disclose related party transactions and relationships, including disallowance of related party costs which could materially affect the financial statement amounts, dictate that related party relationships or transactions be considered material in accordance with GAGAS.

o Programs and Supporting Services not purchased by the Commonwealth:

All material related party transactions that are not associated programs purchased by the Commonwealth or that could affect the provider's financial statements and all instances of common ownership or management control relationships for which 808 CMR 1.02 and the AICPA Statement of Financial Accounting Standards No. 57 (SFAS No. 57) require disclosure, even though there are no transactions, should be disclosed in the UFR notes to the financial statements. One exception to this consideration may, to the extent allowed by the qualitative materiality factors of GAGAS, include the following:

. Gifts furnished to the provider by an official, administrator or manager of the provider.

The materiality of related party transactions should be determined in accordance with the criteria established for materiality and significance in the third general standard of GAGAS.

The notes to the financial statements of the UFR should disclose material (GAGAS definition of material) related party relationships and transactions. The form of the disclosure of material related party transactions should meet the following requirements that have been derived from SFAS No. 57:

a. Nature of related party relationship;

b. The receivables or payables associated with related party transactions for each period the balance sheet or

program budget is presented, and, if not clearly determinable, the conditions and methods of settlement;

c. For each period that an income statement or program budget is presented, the following is required:

(1) A description of transactions and other necessary information needed for an understanding of the impact of the transactions; and
(2) Dollar amounts assigned to transactions, and the impact of determining the terms of the transactions, if different from prior periods.

d. If two or more companies are under common control via ownership or management, the disclosure in a. above is required, even though no transactions occurred, if the existence of that control could result in operating results or a financial position significantly different from that which would have been obtained if the enterprises were autonomous.

Preparers of the UFR should seek assistance from their independent auditor regarding appropriate interpretation of the requirements of 808 CMR 1.02 and the form and content of disclosure as noted above.

Related party disclosures must be made for transactions with related parties as defined by the Code of Massachusetts Regulations 801 CMR 1.00 and the AICPA Financial Accounting Standards Board SFAS No. 57.

The following provisions are effective for disclosure in audits of provider financial statements with fiscal years ending on or after June 30, 1992. Also, these provisions are effective for social service contracts and agreements and related reimbursements executed or renewed after June 30, 1992.

Defininition of Related Party:

Any of the following are considered a related party as defined by 801 CMR 1.02 and SFAS No. 57 and subject to disclosure and certain reimbursement restrictions when providing rent, services, loans, payments, conveyances, gifts, any other transactions or having receivables or payables associated with the transaction to or from the provider:

(a) A person who is or was within the preceding five years a director, stockholder, partner, administrator, manager or trustee of the reporting provider, or a relative of such a

person, or an organization in which a person, who currently serves as a director, stockholder, partner, administrator, manager or trustee of the organization, or a relative of such a person, is, or was within the preceding five years, a director, stockholder, partner, administrator, manager or trustee of the reporting provider. "Relative" shall mean parent, child, brother, sister (whether by whole or half-blood), spouse, adopted child, adoptive parent, stepparent, stepchild, father-in-law, mother-in-law, sister-in-law, brother-in-law, son-in-law, daughter-in-law, grandparent or grandchild; or

(b) Any organization, corporation, partnership, or fiduciary trust where any common ownership or control is held by a person who falls within the scope of paragraph (a) above or by a relative of such a person. "Control" is the ability to influence the policies and actions of an enterprise through ownership of voting stock, contracts and/or other methods, as defined by the AICPA Financial Accounting Standards Board in Statement of Financial Accounting Standard No. 57; or is the ability of an individual or organization, directly or indirectly, to significantly influence or direct the actions or policies of an organization or institution; or

(c) Another corporation, partnership, organization or individual doing business solely with the reporting provider or the provider's related parties; or

(d) A person or organization associated or affiliated with the reporting provider. A person or organization is associated when the person or organization engages in a joint program or business venture directly or indirectly in which the provider or other person or organization receives direct or indirect financial benefit. A person or organization is affiliated when the person or organization:

1. controls a provider; or
2. is controlled by a provider; or
3. is under common control with the provider.

The control may be direct or indirect. A provider or company is under common control with the provider through common ownership or management, even though no transaction occurred, if the common control could have a material impact on the financial statements of the reporting provider, as provided in AICPA Statement of Financial Accounting Standard No. 57. For the purpose of this paragraph, "common ownership" exists where there is direct or indirect ownership of ten percent or more in value of voting stock or five percent of financial interest in the capital assets or profits of any organization.

Independent auditors and UFR preparers must consider materiality and significance as defined by generally accepted government auditing standards for determining if related party relationships and transactions are material and of a significant nature to require disclosure. Materiality and significance is defined by GAGAS as follows:

The Third General Standard for Government Auditing of GAGAS ("Yellow Book"):

The auditor should* consider materiality and/or significance in planning the audit and in selecting the methodology and designing audit tests and procedures, as well as in deciding whether a matter requires disclosure in an audit report. One of the criteria to be considered in determining materiality includes the monetary value of the item. However, materiality and significance often depend on qualitative as well as quantitative factors. Qualitative factors include, but are not limited to the cumulative effect and impact of immaterial items, the objectives of the work undertaken, and the use of the reported information. Decisions on these criteria are based on the auditor's professional judgment. In government audits the materiality level and/or threshold of acceptable risk may be lower than in similar-type audits in the private sector because of the public accountability of the entity, the various legal and regulatory requirements, and the visibility and sensitivity of government programs, activities, and functions.

In determining materiality and/or significance and audit risk, the auditor may consider the following.

a. Amount of revenues and expenditures.

b. Newness of the activity or changes in its conditions.

c. Adequacy of internal controls.

d. Results of prior audits.

e. Level and extent of review or other form of independent oversight.

f. Adequacy of the internal controls for ensuring compliance with laws and regulations.

g. Management's adherence to applicable laws and regulations.

h. Audit report users' expectations.

i. Public perceptions and political sensitivity of the areas under audit.

j. Audit requirements.

* When the term "should" is used to describe the auditor's and/or organization's responsibility, this means that the standards that are applicable to the work and necessary to satisfy the audit objectives are to be followed. Departures from applicable standards must be disclosed in the audit report.

Material Departures from Generally Accepted Accounting Principles (GAAP) when Disclosing Related Party Relationships in Accordance with 808 CMR 1.02:

The existence and value of any nonreimbursable portion of related party costs as defined by 808 CMR 1.15 (8) Certain Costs Paid to a Related Party that have been incurred in Commonwealth-purchased programs should also be disclosed in Schedules B and B-1.

Professional auditing standards of the AICPA, which must be followed by the independent auditor when conducting a GAGAS audit of the UFR, may at times prohibit the independent auditor from rendering an unqualified opinion in accordance with generally accepted accounting principles (GAAP). A qualified opinion may be called for in the auditor's professional judgment because the related party disclosures made by management pursuant to 808 CMR 1.02 in the notes to the financial statements may have departed materially from GAAP as prescribed by the AICPA. The independent auditor is required to utilize AICPA guidance (SFAS No. 57) when available for establishing the conditions and acceptable provisions of GAAP rather than other accounting principles such as 808 CMR 1.02.

The provisions of 808 CMR 1.02 that prescribe conditions for determining the need for related party disclosure differ from SFAS No. 57 in that they incorporate the provisions of SFAS No. 57 and also contain other provisions derived from the Internal Revenue Service, Office of the Attorney General, the Rate Setting Commission and the Division of Purchased Services. The independent auditor may conclude that the provisions from these other authorities materially differ from the provisions of SFAS No. 57 to such an extent that they materially depart from GAAP, as established by the AICPA SFAS No. 57.

When the auditor believes, on the basis of his or her audit, that the financial statements or the notes contain a departure from generally accepted accounting principles, the effect which is material, and he or she has concluded not to express an adverse opinion, a qualified opinion may be required in accordance with AICPA Statement on Auditing Standards (SAS) SAS No. 58 and SAS No. 64.

Sample of Auditor's Report when Disclosure of Related Party Relationships Resulted in a Departure from GAAP:

The following is a sample of an auditor's report on the financial statements that has been qualified because the independent auditor believes that the related party disclosures in the notes to the financial statements contain a material departure from generally accepted accounting principles:

SAMPLE

Independent Auditor's Report on the Financial Statements

We have audited the accompanying balance sheet of X Company (a Massachusetts corporation, not-for-profit) as of June 30, 19X3 and the related statements of support, revenues, expenses and changes in fund balances, and of functional expenses for the year then ended. These financial statements are the responsibility of X Company's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with generally accepted auditing standards, the Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

As more fully described in note X to the financial statements, the Company has disclosed certain related party transactions that materially differ from the related party disclosure guidance of the American Institute of Certified Public Accountants Statement of Financial Accounting Standards No. 57. In our opinion, generally accepted accounting principles require related party disclosures to conform in all material respects with the American Institute of Certified Public Accountants Statement of Financial Accounting Standards No. 57.

In our opinion, except for the effects of not conforming with the related party disclosure guidance as discussed in the preceding paragraph, the financial statements referred to above present fairly, in all material respects, the financial position of X Company as of [at] June 30, 19X3 and the results of its operations and changes in fund balances for the year then ended, in conformity with generally accepted accounting principles.

Our audits were made for the purpose of forming an opinion on the basic financial statements taken as a whole. The

supplementary information included in Schedules A, B, C, D and B-1 is presented solely for purposes of additional analysis and is not a required part of the basic financial statements. Such information is the representation of X Company's management and has not been subjected to the auditing procedures applied in the audit of the basic financial statements, and, accordingly, we do not express an opinion on it.

[Signature]

[Date]

Independent auditors should also follow the suggested compliance testing procedures and audit guidance for compliance with related party disclosure requirements contained in the UFR Auditor's Compliance Supplement and the Auditing Guidelines section of this document.

SUPPLEMENTAL FINANCIAL SCHEDULES A, B, C, D AND SUBSIDIARY SCHEDULE B-1

INFORMATION NOT REQUIRED TO BE AUDITED

The provider organization's management and the auditor may both participate in the preparation of the supplemental financial schedules. The auditor should read the supplemental schedules and consider whether such information is materially inconsistent with information, or the manner of its presentation, appearing in the basic financial statements and propose revisions to the supplemental schedules as appropriate. Supplemental Schedules A, B, C, and D must reconcile and be consistent with certain totals in the basic financial statements. The supplemental schedules must be auditor-submitted (referred to in the auditor's report on the financial statements or in a separate report) and filed under the same cover (stapled or bound) with the basic financial statements.

Unaudited Supplemental Schedules include the following:

A. Supplemental Revenue Schedule
B. Supplemental Expense Schedule
C. Supplemental Employee Schedule
D. Supplemental Program Statistics Schedule
B-1. Subsidiary Itemized Nonreimbursable Costs Schedule

OTHER STATEMENTS, SCHEDULES AND INFORMATION

Other statements, schedules and information that have been audited or not audited may be auditor-submitted and included under the same cover, if requested by the client, required by other report users or deemed appropriate by the auditor, in the UFR filing. These include, but are not limited to, statements of cash flows, schedule of federal awards, details or explanations or items in or related to the basic financial statements, consolidating information, historical summaries of items extracted from the basic financial statements, statistical data and other material, some of which might be from sources outside the accounting system or outside the entity.

Note: The auditor must include a supplemental information paragraph in the auditor's report on the financial statements or prepare a separate report concerning the supplemental information in accordance with SAS No. 29 and SAS No. 52 (Au 551.05 and .06).

Supplemental Schedules A, B, C, D and Subsidiary Schedule B-1 are the representation of management and are not required to be audited. This is reflected in the suggested disclaimer included in the sample Independent Auditor's Report on Financial Statements.

The auditor should read the supplemental schedules and consider whether such information is materially inconsistent with information, or the manner of its presentation, appearing in the basic financial statements and propose revisions to the supplemental schedules as appropriate.

SUPPLEMENTAL SCHEDULE A

The amounts shown under "TOTALS" for lines that have an asterisk (*) must reconcile with the amounts shown under lines 1 through 12 on the Statement of Revenues, Expenses and Changes in Fund Balances under the "Total All Funds This Year" column.

Programs shown under the columns entitled "Program #____" must coincide with the programs listed on the UFR Cover Page, Standard Service Contract Cover Page and Attachment A and must satisfy the definition of Program given in Key Concepts.

In the event that all or a portion of Federated Fund-Raising Organization Allocations were not earmarked or restricted to use in any particular program(s) but, rather, were earmarked to support the provider agency as a whole or to support some nonprogram or fund-raising activity of the provider agency, the applicable amounts should be shown as "Administration," Fund-Raising" or "Nonprogram" and then distributed as designated by the board of directors or by using the same factors developed to allocate Administration on Schedule B or any other reasonable method in accordance with the organizational purpose of the provider.

ACCOUNT DEFINITIONS OF REVENUE:

1.) Gifts, Contributions, Legacies and Bequests. As commonly defined, except that items specifically included in other revenue account definitions (e.g., Client Resources) must be excluded from this account.

2.) Special Events and Activities. Solicitations or events sponsored by the organization in which something of value, such as dinners, dances, bazaars, fashion shows, greeting card sales, bingo, etc., is offered to participants in exchange for a payment or contributions sufficient to yield revenue to the sponsoring organization.

3.) In-kind Contributions. The imputed revenue value of donated goods and personal services. Note: An equal expense must be reported in the applicable expense category.

   a) Government/Personnel. Include in this category the imputed value of staff assigned by the Commonwealth of Massachusetts to work in the provider organization's programs.

b) Government/Nonpersonnel. Include in this category the imputed value of donated space in state facilities, pharmacy services and other noncash governmental resources.

c) Private. Nongovernmental, In-kind contributions.

4.) Grants. Award of funds from a governmental agency corporation or private foundation to support or subsidize a particular project, program or the general charitable purposes and activities of the organization. Note: Contrary to prior year practices, EOHHS Purchasing Agency Cooperative Funding Agreements (as distinct from Purchase-of-Service contracts) and other governmental cash grants should be shown in this account rather than as "Program Service Fees and Reimbursement."

5.) Program Service Fees and Reimbursements. Any payments by or on behalf of service recipients for program services rendered.

a) EOHHS Agencies. Purchase of Service negotiated unit rate and cost reimbursement revenue from the Massachusetts Executive Office of Health and Human Services' (EOHHS) departments and agencies listed in Schedule A, lines 16-28. In addition to those agencies listed, revenue from the following agencies should be reported as other EOHHS on line 29. (Enter the applicable three-letter codes.):

Commission on Veterans' Services (VET)
Department of Medical Security (DMS)
Disabled Person Protection Commission (DAC)
Executive Office of Health and Human Services (EOHHS)
Office of Refuges and Immigrants (ORI)
Soldiers' Home, Chelsea (CHE)
Soldiers' Home, Holyoke (HLY)

b) EOHHS Agency Stipend. Pass-through income for expenses associated with the procurement of direct client care from individual care givers such as family day-care providers or foster families. (Enter the EOHHS source agency in the space provided.)

c) Public/Private Partnership Programs ("4P"). The Private Partners' share of Department of Social Services "4P" contracts. (Enter the DSS's share under the DSS E0HHS Agency, line 23.)

d) EOHHS-Sponsored Client Fees. Individual or third-party payments on behalf of service recipients sponsored by EOHHS agencies through "payor of last resort" service contracts. Note: Exclude Client Resources (see definition k).

e) Other Massachusetts Government Service Fees. Program Service Fees and Reimbursements from non-EOHHS state agencies (e.g., Department of Education, Department of Employment & Training, Executive Office of Communities & Development, Executive Office of Elder Affairs) and from cities, towns, and other Massachusetts public entities. Note: Where the Department of Education, Bureau of Nutrition's revenue is received for a separately defined program, it should be recorded in this account. Where a separately defined Nutrition's program does not exist and the Bureau of Nutrition revenue serves as offsetting support to defray nutritional costs within a program that has a nutritional component (e.g., day-care centers), the revenue should instead be recorded as an "Other MA/Non-MA Government Cash Grant" on line 12.

f) Other MA Government-Sponsored Client Fees. Individual or third-party payments made on behalf of service recipients sponsored by non-EOHHS state agencies, cities, towns, or other governmental entities located within Massachusetts.

g) Other Government Service Fees - Non-Massachusetts. Program Service Fees and Reimbursements from federal agencies or state governments, cities, towns, or other public entities located outside of the Commonwealth of Massachusetts. Note: Federal funding received through Massachusetts state or local government service contracts should be treated as an EOHHS agency or other MA Government Service Fees, as applicable.

h) Other Government-Sponsored Client Fees - Non-MA. Individual or third-party payments (e.g., sliding fees) made on behalf of service recipients from other states or for federal government service recipients sponsored through payor of last resort contracts with governmental agencies located outside of Massachusetts.

i) Medicare - Non-Sponsored Clients. Medicare payments on behalf of service recipients who are not sponsored by any other governmental agency. (For sponsored recipients, record Medicare payments under the applicable Sponsored Client Fees account.)

j) Private Individual Third-Party Fees. Individual or third-party Program Service Fees and Reimbursements on behalf of service recipients who are not sponsored by any governmental agency. This includes payments from other providers for services provided to clients through subcontracts.

k) Client Resources. Revenue received in cash or in-kind from service recipients to defray the cost of program care and service (e.g., SSI, CA, food stamps, fixed or sliding fee Room & Board payments). By the terms of state contracts, these resources are aggregated to defray program costs regardless of client sponsor.

6.) Federated Fund-Raising Organization Allocations. Funds allotted to the organization from a federated fund-raising organization such as the United Way, Community Chest, Combined Jewish Philanthropies or the Commonwealth Campaign. Note: Federated fund-raising organization funds which are utilized as Public/Private Partnership program support for Department of Social Services contract programs should instead be recorded under the Program Service Fees & Reimbursement, Public/ Private Partnership Program account.

7.) Investment Revenue. As commonly defined (may be restricted by donor).

8.) Realized Investment Gain/Loss. As commonly defined.

9.) Gain/Loss on Sale of Assets. As commonly defined.

10.) Revenue from Commercial Products and Services. Revenues from commercial products and services, whether related to an organization's charitable purposes or carried on primarily for profit. Corresponding expenses must be reported on Supplemental Expense Schedule.

11.) Other Revenue. Revenue which does not fall under any other revenue account definition. Note: A description of the revenue type must be entered in the space provided on Schedule A, line 55.

12.) Administration Revenue. Revenue not restricted for any use or attributable to any program. This revenue is allocated in accordance with the instructions for allocation of Administrative expenses.

SUPPLEMENTAL SCHEDULE B

The sum of the amounts marked by a (t) must reconcile to each column's Total Expenses on the Statement of Functional Expenses' totals column, except as noted in the depreciation expense reconciliation note below. The sum of lines 41, 43 and 44 for Administration, Fund-Raising, Non Program and Program Services columns ("Total All Programs") must reconcile to the Statement of Revenue, Expense and Changes in Fund Balance, totals for "All Funds This Year" column, lines 13 through 16.

Allocation of Program Support expenses on line 39a must be made in accordance with GAAP as described on pages 34-38 of this manual in the sections covering Administration Costs and Costs Which Pertain to Various Functions, and on page 27 of the AICPA industry audit guide Audits of Voluntary Health and Welfare Organizations. Allocation of Administrative expenses that pertain to the "Overall Direction" of the organization to programs, line 42, must also be made by utilizing the same principles as noted above.

Allocating Administration: **Administration and support (management and general) costs include expenditures for the "Overall Direction" of the organization, general record keeping, business management, budgeting, general board activities, and related purposes.** Direct supervision of program services and of fund-raising should be charged to those functions. **"Overall Direction"** will usually include the salaries and expenses of the chief officer of the organization and his or her staff. If they spend a portion of their time directly supervising fund-raising or program service activities, such salaries and expenses should be prorated among those functions

Expenses incurred in keeping a charitable organization's name before the public are not properly classified as program services or as fund-raising expenses and should be classified as administration expenses. **The cost of disseminating information to inform the public of the organization's "stewardship" of contributed funds, the publication of appointments, the annual report, etc., should likewise be classified as administration expenses.**

CAUTION

The guidance provided above has been excerpted from the AICPA industry audit guide Audits of Voluntary Health and Welfare Organizations. Administration and Fund-Raising expenses must be separately reported from program services on the Statement of Functional Expenses in accordance with Generally Accepted Accounting Principles. Generally Accepted Accounting Principles prohibit administrative and fund-raising expenses from being charged or allocated to program services on the Statement of

Functional Expenses. The UFR furnishes report users with a general understanding of the benefit derived by program services from administrative expenses by charging and allocating all administrative expenses to programs on line 42 of Expense Schedule B.

The usage methods recommended by the AVHW guide should be used to allocate the individual expenses that make up administration on line 42 to programs. Usage reports and time studies are utilized when the usage basis is used to determine the amount of time and effort that administrative staff devote to the overall direction of the agency and the extent of benefit (administrative salaries and expenses) derived by fund-raising and program service activities.

When it is not possible to utilize usage reports and time studies, other methods are acceptable for allocating administrative expenses on line 42 as follows:

- A basis of allocation (allocation percentage) previously established for expenses that benefit all programs (i.e., centralized telephone system that benefits all programs).

- Use of a basis that utilizes experience levels established for similar costs (executive director's salary allocated using the percentage of direct care salaries incurred in each program).

Methods of allocation that utilize budgeted revenue, received revenue, budgeted costs, anticipated contract reimbursements or received contract reimbursements are not acceptable or in accordance with generally accepted accounting principles.

Provider organizations that receive federal assistance from the Commonwealth must charge or allocate expenses as explained in the Costs Which Pertain to Various Functions' section of this document (page 34) or utilize the Direct Allocation Method of OMB Circular A-122 for charging indirect costs to programs. These indirect federal costs, which are classified as general administration and general expenses (Administration), as defined in paragraph D 4 of the Direct Allocation Method of OMB Circular A- 122, must also be prorated or allocated on line 42 of Expense Schedule B. All other federal costs such as fund-raising and other direct functions must be prorated or directly charged to fund-raising or each program on the appropriate expense line. Provider organizations receiving federal assistance directly from the federal government or entities other than the Commonwealth may utilize other allocation methods approved by the federal government or the other entities to allocate indirect costs associated with federal assistance provided directly by the federal government or the other entities.

The existence of nonreimbursable costs, as contained in 808 CMR 1.15 and OMB Circular A-122, must be disclosed on lines 43 and 44 in each program as applicable (nonreimbursable costs must be disclosed and itemized in Subsidiary Schedule B-1). Social services contract and agreement reimbursements and federal assistance may not be used to defray nonreimbursable costs. Nonreimbursable costs that exist and have not been disclosed are presumed to have been defrayed using Commonwealth and Federal funds. A full description and definition of nonreimbursable costs may be found in Massachusetts Regulation 808 CMR 1.00, Section 1.15, and Federal OMB Circular A-122.

Depreciation expense must be recorded in accordance with the depreciation guidance provided below. Lines 43 and 44, Other Expense, should be used to reconcile the difference between depreciation expense on this schedule and the depreciation expense reported in accordance with GAAP on the basic financial statements. This is required only when depreciation expense is reported on this schedule in accordance with Massachusetts Code of Regulation 801 CMR 1.00 and Federal Single Audit requirements of OMB Circular A-122. Footnotes should report the existence of any reconciliation.

Depreciation. Depreciation for not-for-profit organizations should be defined and determined in accordance with the recommendations of the AICPA industry audit guide, Audits of Voluntary Health and Welfare Organizations (AVHW). The guide indicates that the AICPA Accounting Terminology Bulletin No. 1 properly defines depreciation and identifies depreciation as a means of allocating and distributing the cost or other carrying value of tangible capital assets, less salvage, if any, to expense over the useful life of such assets, rather than a means of funding their replacement (replacement accounting).

This document also recommends that depreciation should be recognized as a cost of rendering current services and should be included as an element of expense in the statement of support, revenue, and expenses of the fund in which the assets are recorded and in the statement of functional expenditures.

Not-for-Profit provider organizations with programs that are supported by funding from the Commonwealth must record depreciation for those programs in accordance with the Massachusetts Code of Regulation 801 CMR 1.00 and Federal Single Audit requirements of 0MB Circular A-122 and/or A-21. Programs which are not supported by funding from the Commonwealth or Federal Assistance must record depreciation in accordance with AVHW recommendations, but may utilize reasonable service lives that may differ from the 801 CMR 1.00 and 0MB Circular A-122 lives. The Massachusetts Code of Regulation 801 CMR 1.00 subscribes to the above but requires that depreciation be reported on the supplemental schedules on a straight-line basis over a service life not less than the periods given below.

Building, Brick and Wood Frame Construction. Useful life of Fire Proof/Noncombustible Construction is 40 years; Exterior Masonry Wall and Frame Construction is 27.5 years.

Improvements. Improvements or betterment to a building owned by the agency which extends the useful life of the building or otherwise adds to its permanent value and which individually or as a related group cost in excess of $500. Useful life is 20 years.

Leasehold Improvements. Improvements or betterment made by the operating agency to a building leased by the agency. NOTE: Improvements which can be removed without substantially damaging the property should not be considered leasehold improvements, they should be classified as equipment or residential furnishings. Useful life is the greater of five (5) years or the term of the lease.

Equipment. Capital furnishings, moveable equipment and fixtures having an acquisition cost (or fair market value at the time of donation) in excess of $500. (or a related group of assets having an acquisition cost in excess of $500) and a useful life of more than one year. Useful life is ten (10) years.

Computer Equipment. Computer equipment has a useful life of five (5) years.

Life Safety Improvements. Building or leasehold improvements or equipment acquisitions made solely to satisfy the requirements of any governmental unit regarding life safety or physical environment. The purpose of such improvements must be documented. Includes such items as sprinklers, fire escapes, alarms, etc. Useful life is five (5) years.

Motor Vehicles. New vehicles' useful life is five (5) years. Used vehicles' useful life is three (3) years.

Residential Furnishings. Capital furnishings used by clients of a group home or community residence and hence subject to heavy wear and tear. This includes household items used by Day Care Programs such as cribs, bassinets, changing tables, etc. Useful life is three (3) years.

Office Furnishings. Useful life is seven (7) years.

Please note that regulations, effective 11/20/92, provide for the following:

"In circumstances where the useful life employed by the provider differs, because of greater or lesser consumption, from that

cited herein, the provider may request of the Division an exception to the cited useful life in the calculation of allowable depreciation. The request must be forwarded to the Division in writing and provide adequate documentation to substantiate the request."

ACCOUNT DEFINITIONS OF EXPENSES:

As part of the Commonwealth's Purchase of Service Pricing Reform Initiative, expense accounts have been extensively restructured using functional component definitions. The UFR utilizes the revised account structure of the final version of the Component Price Catalog.

Successful completion of the Statement of Revenue and Expense, and Changes in Fund Balances; Schedule B: Supplemental Expense Schedule; and Schedule C: Supplemental Employee Schedule, requires careful adherence to the definitions and allocation restrictions established in the schedule instructions, expense account definitions and the program components of the Component Price Catalog. **A crosswalk of Expenses and Corresponding Components has been included in this document.**

As noted in the revenue account definition section, the imputed value of donated goods and services should be reported in the applicable expense category. Staff assigned by the Commonwealth to work in the provider organization's programs and donated space in state facilities should be treated as donated services and their imputed value reported in the applicable expense categories. These imputed values should also be reported in the Supplemental B and C Schedules in the appropriate Employee and Occupancy Expense categories.

1.) Employee Compensation and Related Expenses.

a) Direct Care/Program Support Staff. Salary wages or other nonfringe compensation for the direct program positions defined in the Client Care/Program Staff section of the Program Components appendix. Note the restrictions established on the allocation of Administrative and Accounting/Collections staff (management and general staff) functions which are primarily devoted to the overall direction of the organization as defined in the Program Component's appendix.

b) Administrative Staff. Salary, wages, or other non fringe compensation for the position categories listed on Schedule C: Supplemental Employee Schedule, lines 45-52.

c) Commercial Products & Services Marketing Staff. Salary, wages, or other nonfringe compensation for staff persons whose responsibilities relate primarily to the production, marketing and delivery of commercial products and services and do not involve, except incidentally, client care or supervision.

d) Payroll Taxes. Employer's share of FICA, MUICA, Worker's Compensation Insurance, FUTA (in the case of For-Profit Providers) and other payroll taxes paid on behalf of the provider agency's staff.

e) Fringe Benefits. Life, disability, health and medical insurance, pension and annuity plan contributions, day care, tuition benefits and all other non-salary/wage benefits received by the agency staff as compensation for their personal services.

f) Accrual Adjustments. Adjustment Account to record adjusting entries for accruals such as Accrued Vacation Pay and Partial Payroll expenses when accruals have not been included in other Employee Compensation & Related Expense accounts.

NOTE: UNADJUSTED EMPLOYEE COMPENSATION AND RELATED EXPENSE INFORMATION THAT DOES NOT INCLUDE ACCRUED EXPENSE INFORMATION MAY BE REPORTED FOR a-f OF THIS CATEGORY IF THE ACCRUAL ADJUSTMENT LINE (f) IS UTILIZED.

2.) Occupancy.

Includes both "Program Facilities," as defined in the Program Component's appendix, and corresponding Administrative, Fund-raising, and Non program facilities. Note 1: Facility expenses other than those meeting the "Program Facilities" component definition may not be directly allocated to Program functional centers; 2) Additional restrictions established by procurement regulations (e.g., Related Party depreciation and Donated Asset limitations) apply in certain circumstances. Where expenses exceed established limitations, the excess amount must be recorded as Nonreimbursable Expense on lines 43 and 44 and itemized in Subsidiary Schedule B-1.

a) Facility Lease. All expenses incorporated into a lease for facility space.

b) Mortgage Interest. Interest expense associated with a mortgage of facility space.

c) Facility Depreciation. Depreciation expense associated with facility space mortgaged or owned by the provider.

d) Facility Operation/Maintenance/Furnishings. Includes operation, maintenance, and furnishings for Program Facilities, as defined in the Program Component's appendix, and corresponding Administrative, Fund-raising and Nonprogram Facility expenses. Note: As noted for Facility, direct allocation and regulatory restrictions apply.

e) Leased Program Equipment. Lease expense associated with equipment used in programs (does not include office equipment).

f) Program Equipment Finance Charge. Any interest expense associated with borrowing for the purchase of program equipment (does not include office equipment).

g) Program Equipment Depreciation. Depreciation expense associated with program equipment (does not include office equipment).

h.) Facility General Liability Insurance.

3.) Other Program/Operating Expense. Direct program expenses should be recorded in accordance with the definitions established in the Program Components' appendix. Schedule B also provides for recording corresponding nonprogrammatic expenses for certain accounts in the Administration, Fund-raising and Nonprogram functional centers (i.e., administrative consultants, data processing staff training, travel, meals and other commercial products and services).

Note that nonprogrammatic operating expenses must not be directly allocated to program functional centers. Note: Schedule B utilizes the account name Other Commercial Products and Services to encompass program expenses, other client wages defined as "Commercial Income Resources" in the Program Component's appendix and nonprogrammatic commercial products and services. Such nonprogrammatic operations not meeting the Program Component's definition must be recorded in the Administration or Nonprogram Functional Centers as applicable, matching expenses to the functional center for which the revenue from Commercial Products & Services was recorded.

a) Direct Care/Program Consultants. Includes direct care program consultants, as defined in "Other Direct Care/Program Resources" in the Program Component's appendix.

b) Temporary Help. Includes direct care specialists and contracted relief, as defined in "Other Direct Care/Program Resources" in the Program Component's appendix, and temporary help for Support Services functional centers (Administration, Fund-raising, and Nonprogram).

c) Provider Reimbursement/Stipends

d) Subcontracted Direct Care

e) Staff Training

f) Staff Mileage/Travel.

g) Meals.

h) Client Transportation. Fees charged by external entities to transport clients.

i) Leased Vehicles. Lease expenses associated with vehicles that are used primarily for the transport of clients rather than for administrative purposes.

j) Vehicle Finance Charge. Any interest expense associated with borrowing for the purchase of vehicles that are used primarily to transport clients rather than for administrative purposes.

k) Vehicle Depreciation. Depreciation expense associated with vehicles that are used primarily to transport clients rather than for administrative purposes.

l) Vehicle Insurance. Insurance expense for vehicles used primarily to transport clients rather than for administrative purposes.

m) Incidental Health/Medical Care

n) Medicine/Pharmacy

o) Client Personal allowances

p) Provision Material Goods, Services and Benefits

q) Data Processing

r) Direct Client Wages (Commercial Products and Services)

s) Other Commercial Products and Services (Live Work)

t) Program Supplies & Materials

4.) Administrative Expense. As itemized on Schedule B, lines 29-39, this category includes additional expense accounts for resources reasonably necessary for the policy making, management and administration of the provider organization. **These expenses are associated with the "overall direction" of the organization and must be reported separately on the Statement of Functional Expenses and on Schedule B and should not be directly charged or allocated to program services, fund-raising and nonprogram functions.** Costs that are related to the direct supervision of program services, fund-raising and nonprogram activities should be directly charged or prorated to those functions on the Statement of Functional Expenses and Schedule B. These costs should be identified with those functions by position title or type of expense (e.g., program director, legal) or by utilizing line 39d, "Program Support," on Schedule B.

a) Officer, Director, Trustee Compensation. Salary, wages, stipends or other compensation such as life or health insurance paid to or on behalf of officers, directors and trustees of the organization.

b) Parent Organization Expense. Any assessment fees or allocation of expense to a parent organization.

c) Management Fees. Expenses related to contracted general management services such as accounting, bookkeeping, payroll and billing services (does not include management advisory or consulting services).

d) Fund-Raising Fees. Expenses directly associated with fund-raising activity, including the costs of contracted professional fund-raising services.

e) Legal Fees. All fees or compensation paid by the organization for the legal services of an attorney (does not include lobbying).

f) Audit Fees. All fees or compensation paid by the organization for audit and review services, that

benefits the agency as a whole (externally mandated), which are performed by an independent auditor (does not include accounting services or review services that are not performed to meet regulatory filing requirements).

g) Investment Fees. All fees or compensation paid by the organization for the services of an investment broker.

h) Management Consultant. All fees for management consultant services.

i) Other Professional Fees. All fees or compensation paid by the organization for the services of professionals that do not provide management services which are not reported elsewhere.

j) Leased Office Equipment. All payments for leased office equipment (does not include program equipment).

k) Office Equipment Finance Charge. Any interest expense associated with borrowing for the purchase of office equipment.

l) Office Equipment Depreciation. Depreciation expense associated with office equipment (does not include program equipment).

m) Administrative Vehicle Lease. Lease expenses associated with vehicles that are used primarily for administrative purposes rather than the transport of clients.

n) Administrative Vehicle Finance Charge Any interest expense associated with borrowing for the purchase of vehicles that are used primarily for administrative purposes rather than the transport of clients.

o) Administrative Vehicle Depreciation. Depreciation expense associated with vehicles that are used primarily for administrative purposes rather than the transport of clients.

p) Administrative Vehicle Insurance. Insurance expense associated with vehicles that are used primarily for administrative purposes rather than the transport of clients.

q) Director and Officers Insurance. Professional liability insurance that is acquired to support directors and officers in their board governance and oversight responsibilities.

r) Other Finance Charges. Miscellaneous finance charges not reported elsewhere.

s) Program Support. Expenses of the chief officer of the organization and his or her staff, excluding those required to be classified as "Non-Reimbursable Expense," in lines 43 and 44, which directly or indirectly pertain to various functions, including fund-raising, nonprogram and program services. These expenses include the costs noted in the Program Component's appendix for this category. Costs that are related to the direct supervision of program services, fund-raising and nonprogram activities should be directly charged or prorated to those functions on the Statement of Functional Expenses. **These do not include personnel costs or expenses related to the "overall direction" of the organization.** The program support category (line 39a of Supplemental Schedule B), which is composed of direct and indirect costs attributable to individual programs rather than the overall direction of the agency, includes general record keeping, business management, budgeting, office supplies, telephone, advertising, professional fees and other management expenses that should be identified with program functions rather than Administration.

t) Leased Office Program Equipment. Expenses associated with the leasing of office equipment that is utilized in programs.

u) Professional Insurance. Liability insurance for administrative professional staff.

v) Working Capital Interest. Interest expense to meet cash flow needs.

w) Other Expense. All other administrative (management and general) costs not noted in lines 29-39d that are associated with the chief officer of the organization and his or her staff which are related to the "overall direction" of the agency, including office supplies, equipment and materials, telephone, postage, printing and reproduction, advertising, recruitment and other unitemized nonpersonnel administrative expenses, excluding those required to be classified as "Other Expense" in lines 43 and 44.

Administrative costs related to the overall direction of the organization must be reported separately on the Statement of Functional Expenses and on Schedule B and should not be directly charged or allocated to program services, fund-raising and nonprogram functions. Costs that are related to the direct supervision of program services, fund-raising and nonprogram activities should be directly charged or prorated to those functions on the Statement of Functional Expenses and Schedule B. These costs should be specifically identified with those functions by position title or type of expense (e.g., program director, legal) or by utilizing line 39a, "Program Support," on Schedule B.

5.) Non-Reimbursable Expense, lines 43 & 44. Use of this account should be strictly limited to State and Federal Nonreimbursable expenses that are noted in 808 CMR 1.00 and OMB Circular A-122. These include costs such as tax penalties, bad debts, related-party payments in excess of procurement regulation limitations, or other unreasonable, unauthorized, or nonreimbursable items. (A brief description of itemized nonreimbursable items must be given in Subsidiary Schedule B-1, for all entries on lines 43 & 44.)

Note: Bad debt expense must be reported as an administrative expense on the Supplemental Expense Schedule B and the Statement of Revenue and Expenses and Changes in Fund Balances in accordance with GAAP.

SUPPLEMENTAL SCHEDULE C

The amounts marked by an asterisk (*) must reconcile to amounts with the same account title on Supplemental Expense Schedule B totals column.

SUPPLEMENTAL SCHEDULE D

DEFINITIONS

Cost Reimbursement. A method of purchasing services in which the provider's actual cost associated with service delivery, up to a stated maximum amount, is reimbursed by the purchaser.

Negotiated Unit Rate. A method of purchasing services in which the purchaser pays a predetermined amount, which has been negotiated with the provider agency, upon delivery of each unit of service.

Accommodation Basis Negotiated Unit Rate. A method of purchasing services on a unit rate basis for reserved use. For example, purchasing agencies may purchase the use of a bed and certain services in a residential facility for use on an emergency respite basis. The provider organization is reimbursed for the expense of maintaining the reserved bed and services to be utilized without regard to the actual referral of clients.

Class Rate Non-Negotiated Unit Rate. A type of unit rate in which the predetermined amount paid per unit of service is the same for all providers of that particular service or has been established without negotiation (e.g., Chapter 766 rates).

Accommodations Basis Class/Non-Negotiated Unit Rate. Same as Accommodation Basis Unit Rate, except services are purchased using the Class Rate method of reimbursement.

No Publicly Sponsored Clients. The provider agency has not entered into an agreement or contract to provide services for clients from a governmental entity.

Service Unit. See Key Concepts.

Total Negotiated Program Expense. If the program is supported by the following types of contracts, enter the total annual negotiated and/or program cost from the unit rate calculation page or the cost reimbursement program budget: Cost Reimbursement, Negotiated Unit Rate or Accommodations Basis Negotiated Unit Rate.

Enter "N" if the agency receives no funding through governmental agreements or contracts for clients receiving services in the program, or the program is supported by the following types of contracts:

- Class/Non-Negotiated Unit Rate
- Accommodations Basis Class/Non-Negotiated Unit Rate.

Defined Unit. If the units of service are undefined in a program that is not Publicly Supported or in a Cost Reimbursement contract, enter "N."

For all other types of reimbursement, enter: D-Day, H-Hour, M-Multiple or, if other, indicate type (e.g., "visit").

Hours in Work Week. Indicate how many hours a full-time employee works in a week for each program.

Annual Program Unit Capacity. Annual Program Capacity is the maximum number of service units the program can produce on an ongoing basis, given available resources. Many programs can accommodate increased service provision during emergencies, but

this effort may not be sustained over the long-term. Consequently, the phrase "ongoing" is an essential element of the definition. If programs are licensed, the annual program unit capacity is generally the "licensed capacity" stated on an annualized basis.

Total Units Delivered to all Clients. The sum of lines 8 and 9, plus other private purchase units.

Total Units Delivered To Publicly Sponsored Clients. All units of service delivered (not necessarily invoiced) to government-sponsored clients (includes federal, other states, cities, towns and counties.)

Total Free Care Units. Service units actually delivered by a program for which there was no payment received from any source. Operating subsidies, grants-in-aid or philanthropic support used to defray the cost of free care should not be treated as a payment source unless tied to specifically identified clients. Units of service reimbursed in advance for vacation, sick and inclement weather, through the eighty-five percent (85%) rule, or similar utilization factor adjustments as part of the rate calculation process, should not be treated as free care.

Number of Meals. Enter number of meals associated with amount on line 18, Schedule B. If there were no meals served, enter 0.

Program Space Square Footage.

a - Indicate the appropriate type of facility.

b - Estimate the number of square feet required for program occupancy. Do not include office space used for administrative purposes only. Programs which share space should show for each program the full amount of shared space under the appropriate program column.

c - Specify the number of rooms or offices needed, or the number of bedrooms for residential programs (include room for overnight staff if appropriate).

SUBSIDIARY SCHEDULE B-1
ITEMIZED NONREIMBURSABLE COSTS

Subsidiary Schedule B-1 is prepared only for programs operated by Chapter 766 approved schools or purchased by agencies of the Commonwealth in which the provider has incurred nonreimbursable costs. This means that preparers are not required to disclose in this schedule nonreimbursable cost activity for programs that have not been purchased by agencies of the Commonwealth or are not Chapter 766 approved.

This Subsidiary Schedule supports Supplemental Expense Schedule B by itemizing the nonreimbursable costs disclosed in lines 43 and 44 of Schedule B. In addition, the Subsidiary Schedule comparatively discloses the program's unrestricted revenues not derived from public funds and restricted revenues, as disclosed in Supplemental Revenue Schedule A, that the provider's board of directors and the donor have designated for use in defraying nonreimbursable costs.

This information, taken together with the auditor's compliance testing of nonreimbursable costs, provides UFR report users with a measure of assurance that all nonreimbursable costs have been defrayed with revenues not derived from public funds or designated by donors for other purposes.

By reviewing this schedule, report users and the auditor are readily able to determine whether or not noncompliance findings are necessary inasmuch as there was an adequate or inadequate level of unrestricted revenues in the program, designated by the board of directors and donors, to defray these costs. The sum of the amounts marked by a (tt) must reconcile to similarly entitled lines 43 and 44 of each program and the Total All Programs column on Supplemental Expense Schedule B. The amounts marked by (**) may only be derived from unrestricted revenues (that do not include public funds) or restricted revenues that have been designated by the donor for use in defraying nonreimbursable costs that have been reported for the same program in which the nonreimbursable costs were reported on Supplemental Expense Schedule B. The dollar value of the unrestricted and donor restricted revenues and the line number that they were reported in on Supplemental Revenue Schedule A must also be disclosed.

The existence of nonreimbursable costs, as contained in 808 CMR 1.15 and OMB Circulars A-21 and A-122, must be itemized by natural classification and disclosed in the component and program as applicable. Nonreimbursable costs that exist and have not been disclosed are presumed to have been defrayed using Commonwealth and Federal funds. A full description and definition of nonreimbursable costs may be found in Massachusetts Regulation 808 CMR 1.00, Section 1.15, which is attached to the UFR Auditor's Compliance Supplement, and Federal OMB Circulars A-21 and A-122.

REPORT ON THE INTERNAL CONTROL STRUCTURE BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

The independent auditor must prepare a written report on his/her understanding of the entity's internal control structure and the assessment of control risk made as part of the financial statement audit. This separate report must include as a minimum: (1) the scope of the auditor's work in obtaining an understanding of the internal control structure and in assessing the control risk; (2) the entity's significant internal controls or control structure, including the controls established to ensure compliance with laws and regulations that have a material impact on the financial statements; and (3) the reportable conditions, including the identification of material weaknesses, identified as a result of the auditor's work in understanding and assessing the control risk. Nonreportable conditions in the audited entity's internal control structure not included in the required report must be separately communicated to the audited entity, preferably in writing. Such control structure conditions, when communicated in a management letter to top management, must be referred to in the report on internal controls. All communications must be documented in the working papers. The single audit provisions of OMB Circular A-133 expand upon the requirements and also require that the auditor determine and report whether the entity has internal controls that provide reasonable assurance that it is managing federal financial assistance programs in compliance with applicable laws and regulations.

Note: Independent auditors should consult the "Yellow Book" and the publications listed in the auditing guidelines' section of these instructions prior to conducting the audit and reporting on internal controls. DPS strongly encourages independent auditors to consult the AICPA Statement of Position 92-9 "Audits of Not-for-Profit Organizations Receiving Federal Awards" prior to conducting and reporting on a single audit performed in accordance with OMB Circular A-133.

The Report on Internal Controls and reportable conditions must be prepared in accordance with the third supplemental reporting standard for government financial audits of Generally Accepted Government Auditing Standards and the AICPA Statement on Auditing Standards (SAS) No. 68.

These standards provide for separate communication of nonreportable conditions in an audited entity's internal control structure, preferably in writing, to top management. All communications must be documented in the working papers. The following is a Sample Report on Internal Controls for an audit conducted in accordance with GAGAS.

TO BE COMPLETED BY THE INDEPENDENT AUDITOR

SAMPLE

Report on the Internal Control Structure Based on an Audit of Financial Statements Performed in Accordance with Government Auditing Standards

[Addressee]

We have audited the financial statements of [name of organization] as of and for the year ended June 30, 19XX, and have issued our report thereon dated August 15, 19XX (see note 1).

We conducted our audit in accordance with generally accepted auditing standards and Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

In planning and performing our audit of the financial statements of [name of organization] for the year ended June 30, 19XX, we considered its internal control structure in order to determine our auditing procedures for the purpose of expressing our opinion on the financial statements and not to provide assurance on the internal control structure.

The management of [name of organization] is responsible for establishing and maintaining an internal control structure. In fulfilling this responsibility, estimates and judgments by management are required to assess the expected benefits and related costs of internal control structure policies and procedures. The objectives of an internal control structure are to provide management with reasonable, but not absolute, assurance that assets are safeguarded against loss from unauthorized use or disposition, and that transactions are executed in accordance with management's authorization and recorded properly to permit the preparation of financial statements in accordance with generally accepted accounting principles. Because of inherent limitations in any internal control structure, errors or irregularities may nevertheless occur and not be detected. Also, projection of any evaluation of the structure to future periods is subject to the risk that procedures may become inadequate because of changes in conditions or that the effectiveness of the design and operation of policies and procedures may deteriorate.

For the purpose of this report, we have classified the significant internal control structure policies and procedures in the following categories (see note 2).

(Source of Categories from the "Yellow Book")

1. Cycles of the Agency's Activity
   - Revenues and Receipts
   - Purchases and Disbursements
   - External Financial Reporting

2. Financial Statement Captions
   - Cash
   - Receivables
   - Property and Equipment
   - Payables and Accrued Liabilities
   - Fund Balances

3. Accounting Applications
   - Billings
   - Receivables
   - Cash Receipts
   - Accounts Payable
   - Cash Disbursements
   - Payroll
   - General Ledger

4. Controls used in administering compliance with laws and regulations.
   - General controls
   - Specific Controls

For all of the internal control structure categories listed above, we obtained an understanding of the design of relevant policies and procedures and whether they have been placed in operation, and we assessed control risk.

We noted certain matters involving the internal control structure and its operation that we consider to be reportable conditions under standards established by the American Institute of Certified Public Accountants. Reportable conditions involved matters coming to our attention relating to significant deficiencies in the design or operation of the internal control structure that, in our judgment, could adversely affect the organization's ability to record, process, summarize, and report financial data in a manner that is consistent with the assertions of management in the financial statements (see note 3).

[Include paragraphs to describe the reportable conditions noted.)

A material weakness is a reportable condition in which the design or operation of one or more of the internal control structure elements does not reduce to a relatively low level the risk that errors or irregularities in amounts that would be material in relation to the financial statements being audited

may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions.

Our consideration of the internal control structure would not necessarily disclose all matters in the internal control structure that might be reportable conditions and, accordingly, would not necessarily disclose all reportable conditions that are also considered to be material weaknesses as defined above. However, we believe none of the reportable conditions described above is a material weakness.

We also noted other matters involving the internal control structure and its operation that we have communicated to the management of [name of organization] in a separate letter dated August 15, 19XX (see note 4).

This report is intended for the information of the audit committee, management, and The Commonwealth of Massachusetts Division of Purchased Services. However, this report is a matter of public record and its distribution is not limited.

[Signature]

[Date]

Notes:

1. Describe any departure from the standard report.

2. See paragraph 7.7 of AICPA Statement of Position 92-9.

3. Paragraph 17 of SAS No. 60, Communication of Internal Control Structure Related Matters Noted in a Financial Statement Audit, prohibits the auditor from issuing a written report representing that no reportable conditions were noted during the audit. When the auditor notes no reportable conditions during an audit, he or she may issue a report, such as the following, to satisfy the requirements of Government Auditing Standards.

[The first through the fifth paragraphs of the report are the same as those illustrated above]

Our consideration of the internal control structure would not necessarily disclose all matters in the internal control structure that might be material weaknesses under standards established by the American Institute of Certified Public Accountants. A material weakness is a condition in which

the design or operation of one or more of the internal control structure elements does not reduce to a relatively low level the risk that errors or irregularities in amounts that would be material in relation to the financial statements being audited may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions. We noted no matters involving the internal control structure and its operations that we consider to be material weaknesses as defined above.

[The last two paragraphs of the report are the same as that illustrated above.]

4. If a separate letter has not been issued, this paragraph should be omitted.

Note: DPS strongly encourages independent auditors to consult the AICPA Statement of Position 92-9 "Audits of Not-for-Profit Organizations Receiving Federal Awards," which is the source for this sample, prior to conducting and reporting on a single audit performed in accordance with the single audit provisions of OMB Circular A-133, "Audits of Institutions of Higher Education and Other Nonprofit Organizations."

REPORT ON COMPLIANCE

The independent auditor must prepare a written report on his/her tests of compliance with applicable laws and regulations. This separate report must contain a statement of positive assurance on those items which were tested for compliance, and negative assurance on those items not tested. It must include all material instances of noncompliance and all instances or indications of illegal acts which could result in criminal prosecution. Instances of noncompliance with laws and regulations that are nonmaterial from a quantitative and qualitative perspective must be reported to top management in a separate communication, preferably in writing (management letter). If applicable, the compliance report must state that the auditors found instances of nonmaterial noncompliance with laws and regulations that are being separately reported to management. All communications must be documented in the working papers. The single audit provisions of OMB Circular A-133 include additional reporting requirements for instances of noncompliance with laws and regulations which should be consulted for single audits.

Note: Independent auditors should consult the "Yellow Book" and the publications listed in the auditing guidelines' section of these instructions prior to performing the audit and reporting on compliance. DPS strongly encourages independent auditors to consult the AICPA Statement of Position 92-9

"Audits of Not-for-Profit Organizations Receiving Federal Awards" prior to conducting and reporting on a single audit performed in accordance with OMB Circular A-133.

Independent Auditors Report on Compliance. The Report on Compliance and reportable conditions must be prepared in accordance with the second supplemental reporting standard for government financial audits of Generally Accepted Government Auditing Standards and the AICPA Statement on Auditing Standards (SAS) No. 68.

These standards provide for separate communication of nonmaterial instances of noncompliance of the audited entity, preferably in writing, to top management. All communications must be documented in the working papers. The following are Sample Reports on Compliance for an audit conducted in accordance with GAGAS.

SAMPLE

TO BE COMPLETED BY THE INDEPENDENT AUDITOR

Report on Compliance With Laws, Regulations, Contracts, and Grants Based on an Audit of Financial Statements Performed in Accordance With GAGAS When the Auditor's Procedures Disclose No Material Instances of Noncompliance

[Addressee]

We have audited the financial statements of [name of organization] as of and for the year ended June 30, 19XX, and have issued our report thereon dated August 15, 19XX (see note 1).

We conducted our audit in accordance with generally accepted auditing standards and Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

Compliance with laws, regulations, contracts, and grants applicable to [name of organization] is the responsibility of [name of organization]'s management. As part of obtaining reasonable assurance about whether the financial statements are free of material misstatement, we performed tests of [name of organization]'s compliance with certain provisions of laws,

regulations, contracts, and grants. However, the objective of our audit of the financial statements was not to provide an opinion on overall compliance with such provisions. Accordingly, we do not express such an opinion.

The results of our tests indicate that, with respect to the items tested, [name of organization] complied, in all material respects, with the provisions referred to in the preceding paragraph. With respect to items not tested, nothing came to our attention that caused us to believe that [name of organization] had not complied, in all material respects, with those provisions (see note 2).

This report is intended for the information of the audit committee, management, and The Commonwealth of Massachusetts Division of Purchased Services. However, this report is a matter of public record and its distribution is not limited.

[Signature]

[Date]

Notes:

1. Describe any departure from the standard report.

2. If the auditor determines noncompliance is pervasive and he or she is not able to provide negative assurance, the auditor's report should consist of the following:

[First three paragraphs as illustrated above.]

The results of our tests indicate that, with respect to the items tested, the [name of organization] complied with those laws and regulations referred above, except as described in the attached schedule. However, the extent of noncompliance noted in our testing indicates that, with respect to items that were not tested by us, there is more than a relatively low risk that the [name of organization] may not have complied with the provisions referred to in the preceding paragraph. These matters were considered by us in evaluating whether the basic financial statements are presented fairly in conformity with generally accepted accounting principles.

[Last paragraph as illustrated above.]

Note: DPS strongly encourages independent auditors to consult the AICPA Statement of Position 92-9 "Audits of Not-for-Profit Organizations Receiving Federal Awards," which is the source for this sample, prior to

conducting and reporting on a single audit performed in accordance with the single audit provisions of OMB Circular A-133, "Audits of Institutions of Higher Education and Other Nonprofit Organizations."

SAMPLE

TO BE COMPLETED BY THE INDEPENDENT AUDITOR

Report on Compliance With Laws, Regulations, Contracts, and Grants Based on an Audit of Financial Statements Performed in Accordance With GAGAS When Material Instances of Noncompliance Exist

[Addressee]

We have audited the financial statements of [name of organization], as of and for the year ended June 30, 19XX, and have issued our report thereon dated August 15, 19XX (see note 1).

We conducted our audit in accordance with generally accepted auditing standards and Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

Compliance with laws, regulations, contracts, and grants applicable to [name of organization] is the responsibility of [name of organization]'s management. As part of obtaining reasonable assurance about whether the financial statements are free of material misstatement, we performed tests of [name of organization]'s compliance with certain provisions of laws, regulations, contracts, and grants. However, the objective of our audit of the financial statements was not to provide an opinion on overall compliance with such provisions. Accordingly, we do not express such an opinion.

Material instances of noncompliance are failures to follow requirements, or violations of prohibitions, contained in laws, regulations, contracts, or grants that cause us to conclude that the aggregation of the misstatements resulting from those failures or violations is material to the financial statements. The results of our tests of compliance disclosed the following material instances of noncompliance, the effects of which have been corrected in [name of organization]'s 19XX financial statements.

[Include paragraphs describing the material instances of noncompliance noted.]

We considered these material instances of noncompliance in forming our opinion on whether [names of organization]'s 19XX financial statements are presented fairly, in all material respects, in conformity with generally accepted accounting principles, and this report does not affect our report dated August 15, 19XX, on those financial statements.

Except as described above, the results of our tests of compliance indicate that, with respect to the items tested, [name of organization] complied, in all material respects, with the provisions referred to in the third paragraph of this report; and, with respect to items not tested, nothing came to our attention that caused us to believe that [name of organization] had not complied, in all material respects, with those provisions (see note 2).

This report is intended for the information of the audit committee, management, and The Commonwealth of Massachusetts Division of Purchased Services. However, this report is a matter of public record and its distribution is not limited.

[Signature]

[Date]

Notes:

1. Describe any departure from the standard report.

2. If there is pervasive noncompliance and negative assurance cannot be provided, the report should be modified as follows:

[First three paragraphs as illustrated above.]

The results of our tests indicate that, with respect to the items tested, the [name of organization] complied with those laws and regulations referred above, except as described in the attached schedule. However, the extent of noncompliance noted in our testing indicates that, with respect to items that were not tested by us, there is more than a relatively low risk that the [name of organization] may not have complied with the provisions referred to in the preceding paragraph. These matters were considered by us in evaluating whether the basic financial statements are presented fairly in conformity with generally accepted accounting principles.

[Last paragraph as illustrated above.]

Note: DPS strongly encourages independent auditors to consult the AICPA Statement of Position 92-9 "Audits of Not-for-Profit Organizations Receiving Federal Awards", which is the source for this sample, prior to

conducting and reporting on a single audit performed in accordance with the single audit provisions of OMB Circular A-133, "Audits of Institutions of Higher Education and Other Nonprofit Organizations."

SAMPLE

TO BE COMPLETED BY THE INDEPENDENT AUDITOR

Report on Compliance With Laws, Regulations, Contracts, and Grants Based on an Audit of Financial Statements Performed in Accordance With GAGAS When Uncertainty About the Effects of Noncompliance Exists

[Addressee]

We have audited the financial statements of [name of organization], as of and for the year ended June 30, 19XX, and have issued our report thereon dated August 15, 19XX (see note 1).

We conducted our audit in accordance with generally accepted auditing standards and Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

Compliance with laws, regulations, contracts, and grants applicable to [name of organization] is the responsibility of [name of organization]'s management. As part of obtaining reasonable assurance about whether the financial statements are free of material misstatement, we performed tests of [name of organization]]'s compliance with certain provisions of laws, regulations, contracts, and grants. However, the objective of our audit of financial statements was not to provide an opinion on overall compliance with such provisions. Accordingly, we do not express such an opinion.

Material instances of noncompliance are failures to follow requirements, or violations of prohibitions, contained in laws, regulations, contracts, or grants that cause us to conclude that the aggregation of the misstatements resulting from those failures or violations is material to the financial statements. The results of our tests of compliance disclosed the following instances of noncompliance, the effects of which may be material to the financial statements but for which the ultimate resolution cannot presently be determined. Accordingly, no

provision for any liability that may result has been recognized in [name of organization]'s 19XX financial statements (see note 2).

[Include paragraphs describing the instances of noncompliance noted.]

We consider these instances of noncompliance in forming our opinion on whether [name of organization]'s 19XX financial statements are presented fairly, in all material respects, in conformity with generally accepted accounting principles, and this report does not affect our report dated August 15, 19XX, on those financial Statements.

Except as described above, the results of our tests of compliance indicate that, with respect to the items tested, [name of organization] complied, in all material respects, with the provisions referred to in the third paragraph of this report; and, with respect to items not tested, nothing came to our attention that caused us to believe that (name or organization] had not complied, in all material respects, with those provisions.

This report is intended for the information of the audit committee, management, and The Commonwealth of Massachusetts Division of Purchased Services. However, this report is a matter of public record and its distribution is not limited.

[Signature]

[Date]

Notes:

1. Describe any departure from the standard report.

2. The effect of the instances of noncompliance is considered when reporting on the basic financial statements, if material to the basic financial statements, an explanatory paragraph similar to the following should be inserted in the opinion paragraph in the auditor's report on the financial statements:

As discussed in note X, [name of organization] failed to comply with certain requirements applicable to the state and federal awards programs in which it participates. The financial statements do not include an adjustment for any liability that may result from the actions of the organization and state and federal agencies relative to these instances of noncompliance.

Auditors should be aware that instances of noncompliance may be material, either individually or in aggregate, warranting an adverse opinion on the financial statements.

Note: **DPS strongly encourages independent auditors to consult the AICPA Statement of Position 92-9 "Audits of Not-for-Profit Organizations Receiving Federal Awards", which is the source for this sample, prior to conducting and reporting on a single audit performed in accordance with the single audit provisions of OMB Circular A-133, "Audits of Institutions of Higher Education and Other Nonprofit Organizations."**

SAMPLE

TO BE COMPLETED BY THE INDEPENDENT AUDITOR

Report on Compliance With Laws, Regulations, Contracts, and Grants Based on an Audit of Financial Statements Performed in Accordance With GAGAS When the Auditor Decides Not to Perform Any Tests of Compliance (see note 1)

[Addressee]

We have audited the financial statements of [name of organization], as of and for the year ended June 30, 19XX, and have issued our report thereon dated August 15, 19XX (see note 2).

We conducted our audit in accordance with generally accepted auditing standards and Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

Compliance with laws, regulations, contracts, and grants applicable to [name of organization] is the responsibility of [name of organization]'s management. As part of our audit, we assessed the risk that noncompliance with certain provisions of laws, regulations, contracts, and grants could cause the financial statements to be materially misstated. We concluded that the risk of such material misstatement was sufficiently low that it was not necessary to perform tests of [name of organization]'s compliance with such provisions of laws, regulations, contracts, and grants.

However, in connection with our audit, nothing came to our attention that caused us to believe that [name of organization] had not complied, in all material respects, with the laws, regulations, contracts, and grants referred to in the preceding paragraph.

This report is intended for the information of the audit committee, management, and The Commonwealth of Massachusetts Division of Purchased Services. However, this report is a matter of public record and its distribution is not limited.

[Signature]

[Date]

Notes:

1. This report is only appropriate in rare circumstances, based on assessments of materiality and audit risk, where the auditor may decide not to perform any tests of compliance with provisions of laws, regulations, contracts, and grants. (See paragraph 7.27 of The AICPA Statement of Position 92-9 for discussion of dating of reports.)

2. Describe any departure from the standard report.

Note: DPS strongly encourages independent auditors to consult the AICPA Statement of Position 92-9 "Audits of Not-for-Profit Organizations Receiving Federal Awards", which is the source for this sample, prior to conducting and reporting on a single audit performed in accordance with the single audit provisions of OMB Circular A-133 "Audits of Institutions of Higher Education and Other Nonprofit Organizations."

PROVIDER ORGANIZATION'S RESPONSE TO AUDITOR'S REPORT

This page affords an opportunity for the provider organization to respond to or comment upon any matter included in the Report and is prepared by the organization as an optional response to the auditor's reports. The provider organization's management is encouraged to provide UFR report users, including the provider's board of directors, with pertinent facts and insight concerning internal control and compliance findings appearing in the auditor's reports.

ACKNOWLEDGMENT OF THE BOARD OF DIRECTORS

The board of directors must acknowledge receipt and review of the Uniform Financial Statements and Independent Auditor's Report (UFR). The acknowledgments must be accomplished through a vote of the board of directors to recognize and accept the representations of management and the expression of opinions by the Independent Auditor as embodied in the UFR. The board of directors must also certify under pains and penalties of perjury and to the best of the members of the board of directors' knowledge, that all material (as defined by GAGAS) related party disclosures have been made by management in the notes to the financial statements and schedules of the UFR. A representation letter on the organization's stationary, addressed to the independent auditor, must be utilized to accomplish this acknowledgment. A sample of the narrative of the representation letter, which contains the minimum essential elements necessary to fulfill this requirement, has been included in the forms package.

AUDITING GUIDELINES

The audit must be conducted in accordance with Generally Accepted Government Auditing Standards (GAGAS), which incorporates the AICPA standards for field work and reporting of Generally Accepted Auditing Standards (GAAS). The AICPA requires the public accountant to state in the Independent Auditor's Report that the audit was made in accordance with Generally Accepted Auditing Standards. Auditors should review the additional requirements of GAGAS that are contained in the "Yellow Book" prior to beginning the audit. Particular attention should be paid to the GAGAS General Standards and Field Work and Reporting Standards for GAGAS Financial Audits. In performing an audit in accordance with GAAS and GAGAS, the auditor assumes certain audit and reporting responsibilities.

The first standard of field work of GAAS requires that the work is to be adequately planned and the first supplemental planning field work standard of GAGAS requires that planning should include consideration of the audit requirements of all levels of government. Also, the third general standard of GAGAS states

that due professional care should be used in conducting the audit and in preparing related reports. In planning the audit, the auditor should consider and obtain a knowledge of matters that relate to the nature of the entity's business and its operating characteristics. Such matters include, for example, the type of business, services, related parties and methods of compensation. The auditor should also consider matters affecting the industry in which the entity operates, such as economic conditions, government regulations and changes in technology and practices, as they relate to his audit. Other matters such as accounting practices common to the industry, competitive conditions, and, if available, financial trends and ratios should be considered by the auditor.

Knowledge of an entity's business is ordinarily obtained through experience with the entity or its industry and inquiry of personnel of the entity. Working papers from prior years may contain useful information about the nature of the business, organizational structure, operating characteristics, and transactions that may require special consideration. Other sources an auditor may consult include AICPA accounting and audit guides, industry publications, textbooks, periodicals, and individuals' knowledgeable about the industry.

In planning the GAAS, GAGAS and Federal Single audit engagement of a provider organization, the independent auditor should consult:

(1) AICPA industry audit guide Audits of Voluntary Health and Welfare Organizations

(2) Standards of Accounting and Financial Reporting for Voluntary Health and Welfare Organizations, "Black Book," Revised 1988 - Third Edition of the National Health Council, Inc., National Assembly of National Voluntary Health and Social Welfare Organizations, Inc., and United Way of America

(3) AICPA, "SAS 53, The Auditor's Responsibility to Detect and Report Errors and Irregularities" (Supersedes SAS 16 for fiscal years beginning 1/1/89)

(4) AICPA, "SAS 54, Illegal Acts by Clients" (Supersedes SAS 17 for fiscal years beginning 1/1/89)

(5) AICPA, "SAS 68, Compliance Auditing Applicable to Governmental Entities and Other Recipients of Governmental Financial Assistance" (Supersedes SAS 63.)

(6) AICPA, Statement of Position 92-9 "Audits of Not-for-Profit Organizations Receiving Federal Awards."

(7) Financial Accounting Standards Board (FASB) Current Text

(8) AICPA Professional Standards

(9) Comptroller General of the United States, Government Auditing Standards - Standards for Audit of Governmental Organizations, Programs, Activities and Functions (1988)

(10) Circular A-110: Uniform Requirements For Audits of Institutions of Higher Education, Hospitals and Other Non-Profits"

(11) OMB, Circular A-133: Audits of Institutions of Higher Education and other Nonprofit Organizations

(12) OMB, Circular A-122: Cost Principles for Nonprofit Organizations

(13) OMB, Circular A-21: Cost Principles for Educational Institutions

(14) OMB, Catalog of Federal Domestic Assistance

(15) Compliance Supplements to OMB A-133

(16) Commonwealth of Massachusetts, Division of Purchased Services, Uniform Financial Statements and Independent Auditor's Report, Auditor's Compliance Procedures Supplement

(17) Code of Federal Regulation (CFR)

(18) FASB 93 and Technical Bulletin 88-1

The following Nonprofit Organization Reference Checklist specifies matters customarily disclosed in financial statement notes which should be disclosed to the Commonwealth of Massachusetts' funding and regulatory bodies, the intended users of the Report.

Nonprofit Organization Reference Checklist

Explanation of References in Brackets:

ARB = Accounting Research Bulletin
APB = Accounting Principles Board Opinion
SFAS = Statement of Financial Accounting Standards
SAS = Statement of Auditing Standards
SOP = AICPA Statement of Position
FASBI = Financial Accounting Standards Board Interpretation

TB = Technical Bulletin issued by staff of the *FASB
AVHW = AICPA Industry Audit Guide, Audits of Voluntary Health and Welfare Organizations
(AC) = Reference to section number in FASB Accounting Standards Current Text
(AU) = Reference to section number in AICPA Professional Standards (vol. 1) of SAS cited
OMB = Office of Management and Budget
CMR = Code of Massachusetts Regulation
CMRID = Code Of Massachusetts Interpretive Document

. Disclosure of Accounting Policies and Other Disclosures
(APB 22) (AC A10 and 128)

. Accounting Changes
(APB 20) (AC A06 and A35)
(SFAS 83, 32 and 16)

. Comparative Financial Statements
(ARB 43) (AC F43) (AVHW)

. Nonmonetary Transactions
(APB 29) (AC C11 and N35)
(FASBI 30) (AVHW Chap. 5)

. Contingencies and Commitments
(SFAS 5) (AC C59) (FASBI 34) (AU 530)

. Subsequent Events
(SFAS 5) (AC C59 and B0) (SAS 1)
(AU 560 and 561) (APB 16)

. Pension Plans
(SFAS 87) (SFAS 36)
(TB 81-3) (AC P15)

. Carrying Amount of Investments (AVHW, Chap. 2)

. Related Party Transactions (SFAS 57) (808 CMR 1.02)
(CMRID DPS-A032) (SAS 45)
(AU 334) (AU 9334)

. Investments (S0P 78-10) (AVHW, Chap. 2)

. Affiliated Organizations (AVHW, Chap. 6)

. Receivables (ARB 43) (AC R36, I69, V18)
(APB 12, 21) (S0P 78-10)

. Property, Plant and Equipment and Depreciation (SFAS 93)
(APB 12) (SFAS 34) (AC I67)
(AVHW, Chap. 3) (AVHW, Chap. 4)

- Note that the Division of Purchased Services' reporting policy requires depreciation to be computed on a straight-line basis over prescribed services lives (see Instructions to Supplemental Schedule B).

- Also note that title to all furnishings and equipment provided by the Commonwealth of Massachusetts or wholly purchased through a Commonwealth of Massachusetts Purchase-of-Service Contract or Cooperative Funding Agreement vests in the Commonwealth. Accordingly, such assets should not be treated as assets of the provider organization. Assets held in trust for the Commonwealth, if material, should be disclosed in financial statement notes.

- Interest on Interfund Borrowing (SOP 78-10 par. 118)

- Notes Payable (SFAS 5 pars. 18-19; SFAS 47, par. 118) (AC C59) (APB 21) (AC I69) (ARB 43) (AC BO5) (SFAS 6) (FASBI 8) (TB 79-3)

- Capital Leases (SFAS 13) (AC L1O)

- Operating Leases (SFAS 13) (AC L10) (SFASs 17, 22, 23, 26, 27, 28, and 29) (FASBIs 19, 21, 23, 24, 26, and 27) (TBs 79-10, 79-11, 79-12, 79-14, 79-15, 79-16, 79-17 and 79-18)

- Other Liabilities, Deferred Credits, Loss contingencies (SFAS 5) (FASB1 14) (AC C59)
(Vacation and Sick Accruals and Termination) (SFAS 43)

(SFAS 74) (AC C44 and C45)

- Donor Restrictions (S0P 78-10, par. 59 & 54-62) (AVHW Chap. 1 p. 2, & 3 Chap. 5)

- Tax Status (FASBI 5) (AC C59)

- Donated Goods and Services (S0P 78-10, Par. 67) (AVWH Chap. 5)

- Note that staff assigned by the Commonwealth of Massachusetts to work in the provider organization programs and free, donated space in state facilities should be treated as donated services with their imputed value reported as "In-Kind Contributions - Government" personnel and nonpersonnel on Supplemental Schedule A. These imputed values should also be reported in the appropriate employee and occupancy expense categories in Supplemental Schedules B and C.

- Fund-Raising (SOP 78-10) (AVHW, p. 42)

- Allocation of Expenses (SOP 78-10, Par. 100) (AVHW, Chap. , p. 27)

- Federal Grants (OMB A-133, A-128, A-110)

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COMPONENT PRICE CATALOGUE

FISCAL YEAR 1993

EXECUTIVE OFFICE FOR ADMINISTRATION & FINANCE

William F. Weld
Governor

Peter Nessen
Secretary

DIVISION OF PURCHASED SERVICES

Dana Roszkiewicz
Assistant Commissioner

January 14, 1992

Addendum 1, April 16, 1992

INTRODUCTION TO COMPONENT PRICING

In order to understand Component Pricing, it is first necessary to understand the larger program development and procurement process of which it is a part.

The process begins with the program's clients. The procuring department and the private provider must agree on the target population and on suitable goals or desired outcomes for the clients of the program.

In order to achieve the desired client outcomes, the program must carry on certain activities. For example, if a change in a client's behavior is desired, the procuring department and the provider must agree on an appropriate course of behavior modification designed to produce this change.

Activities, in turn, require resources. Conducting a behavior modification program, for example, requires properly trained and supervised staff, instructional materials and an appropriate facility. We use the term "program components" to refer to these required resources.

Although each social service program is unique, every program is designed and built using the same basic set of program components. The target population, program model and desired outcomes will determine the program components. Some program components are common to all social service programs; all programs require staff, but appropriate staffing patterns vary by program.

Rather than separately pricing each unique program based on its spending in the past or expected future expenses, the Division of Purchased Services has developed standard prices for a list of program components. Developing a unit rate or cost reimbursement budget for an individual program, then, simply involves matching these component prices with the specific program components which the procuring department and provider have used to design and build the program.

Detailed, step-by-step instructions for developing program rates are set forth in the next section of this Catalogue. The component prices, themselves, are set forth in the following section. Appendix A contains the identification of methodologies used to calculate prices and the data sources supporting the methodology.

Note that this Catalogue will be updated periodically to reflect updated market price, improved data collection and continuing analysis. The most recent edition must always be used when developing an initial rate or amending an existing rate.

HOW TO USE THIS CATALOGUE TO DEVELOP RATES

The following is a step-by-step guide to developing program rates using the catalogue. Detailed instructions on the correct use of individual program components and their component prices are included with the component definitions in the next section of this Catalogue.

Step 1 Before beginning the pricing process, you should complete the Attachment A of the Request for Proposal or Contract document. You will need this information to properly complete the Attachment B budget.

Step 2 Carry over to the Attachment B budget all component resources specified in the Attachment A.

In carrying over resources from the Attachment A, it is necessary to categorize the resources according to the program components listed in this Catalogue. Accordingly, it is essential to review the Catalogue's program component definitions and/or the catalogue index carefully in order to avoid misclassifying required resources. If the particular position title is not specified, it will have been included in the generic "Direct Care" sections. All definitions must be read carefully in order to select the correct program component.

Step 3 For each Direct Care/Program Staff component entered on the Attachment B at Step 2, enter the required full time equivalents under the column entitled "FTE's".

Step 4 For each item listed under the column entitled "Program Component", enter a price within the Component Price Range from this Catalogue.

Step 5 Add the amounts for each component on the Attachment B and enter the sums on the line for "Program Total".

RANGE

Where program type, dollar volume, geographic location, professional credentials or other such factors are deemed relevant to the determination of a component price, several component price ranges may be included in the applicable section of this catalogue. (When separate ranges are not furnished, it is presumed that the varying costs associated with such factors can be fairly accommodated within the range.) Where more than one range is furnished by the catalogue, the range which most closely matches the particular specifications of the Attachment A should be used.

The parties should select a price which reflects the resource needs and marketplace realities of the particular program.

PROGRAM REQUIREMENTS

It is the terms of the Attachment A and not the resources currently available in the program which governs the selection of the proper component price range. For example, this Catalogue furnishes separate component price ranges for "Social Worker - LICSW" and for "Social Worker-LSW". If the Attachment A specify a social worker with no reference being made to the need to employ an LICSW, then the simple "Social Worker" range should be used. The fact that the program currently employs an LICSW has no bearing on the selection. The provider should not fit the salary range which suits the position. The position should be selected as the component which is most appropriate to meet the need of the program's clients.

CALCULATION

Note that, in some cases, this Catalogue requires that a calculation be made in order to determine the component price range.

EXAMPLE: The Catalogue provides a price range for each direct care/program staff category. This range must be multiplied by the number of FTE's (see Step 3) to determine the component price range.

EXAMPLE: The price range for "meals" is from $1.89 per meal to $2.12 per meal for adults. The number of meals to be provided must be multiplied by these amounts to derive the component price range.

PROGRAM CAPACITY

The assumptions used to calculate component prices must always reflect the expected program operational capacity, not the utilization.

SINGLE PRICE

Where the catalogue furnishes only a single component price rather than a range of component prices, enter the single price on the Attachment B.

NEGOTIABLE PRICES

In some instances, no component price range is furnished for certain program components defined in the Catalogue. Instead, the price is stated to be "Negotiable". Amounts entered under the Attachment B "Amount" column for these components should reflect the provider's competitive proposal or the negotiated agreement of the parties.

CREDENTIALS

All direct care/program staff components are defined, in part, in terms of required credentials. Note, that the staff member who actually fills a position possesses a particular credential is irrelevant to the classification of the position unless the contract requires the credential for that position.

FUNCTION VS. TITLE

Direct care/program staff components are also defined in terms of program function. Accordingly, a licensed physician should be classified as a "Physician" only if s/he provides medical care. If a physician functions as a "Program Director", then that category should be used.

It is the definition, not the title which governs the choice of a component. A particular program's "Residence Director", for example, may be classified as a Program Manager, Program Director, Assistant Program Director, or Supervisor depending upon the actual functions performed and scope of responsibility involved. Yet, the fact that the titles used below do coincide with titles customarily used by program staff does not settle the question of proper classification. Again, the definitions govern. A particular program position is classified as a "Case Worker/Manager", rather than as a "Counselor", if his/her credentials and responsibilities coincide more closely with the definition of "Case Worker".

The Catalogue is formatted to establish a hierarchical schedule for the components e.g. the Program Director would report to the Program Manager, and a Direct Care/ Program Staff I would report to a Direct Care/ Program Staff Supervisor.

All direct care or program staff positions which are not specifically defined, below - such as American Sign Language interpreter, phlebotomist, instructor, resource librarian, medical technician, health education specialist, work procurement specialist, certified occupational therapy assistant, etc. - should be classified as "Direct Care/Program Staff I, II or III, as appropriate.

PRICE RANGE

Except when the definitions of applicable components provide otherwise, the ranges set forth for each direct care/program staff component are intended to accommodate seniority, shift differentials, supervisory responsibilities, bilinguality (including American Sign Language) or be based on the extreme developmental needs of the client(s) and geographic location.

100 DIRECT CARE / PROGRAM STAFF

101 Program Manager

An individual who has overall responsibility for the management, oversight and coordination of a programmatic functional area within or across programs as in the case of "Medical Director", "Residence Director", "Clinical Director", "Education Director", etc. (Compensation of individuals whose responsibilities primarily involve an administrative function which cuts across programs is included in the "Support" component.)

Price: Negotiable

102 Program Director

An individual who has overall responsibility for the day-to-day operation of a one or more individual programs.

Code #	# of Staff Supervised	# of Credentialed Staff Supervised	Price Range
102-1	0 - 5	n/a	$ 20,000 to $ 30,000
102-2	6 - 10	n/a	$ 21,100 to $ 31,650
102-3	11 - 20	n/a	$ 22,600 to $ 33,900
102-4	21 - 30	n/a	$ 24,600 to $ 36,900
102-5	31 - 40	0 - 5	$ 26,600 to $ 39,900
102-6	41 - 50	6 - 10	$ 34,600 to $ 51,900
102-7	51 -100	11 - 20	$ 34,600 to $ 51,900
102-8	100+	21+	$ 39,500 to $ 59,250

103 Assistant Program Director

An individual who reports directly to the Program Director, acts for the Program Director in his/her absence, and functions as an advisor/assistant to the Program Director.

Price Range: Up to 0.85 times the Price Range for Program Director

104 Supervising Professional

A credentialled professional (Physician, Psychiatrist, Social Worker, Nurse, etc.) whose primary responsibility is the supervision of fellow credentialed professionals in the daily performance of their programmatic functions. A professional whose duties chiefly entail supervision of nonprofessionals or paraprofessionals should be classified under 133 - Direct Care/ Program Staff Supervisor. Note that Supervisors may also provide incidental direct client care.

Price Range: Up to 1.15 times the Average Price Range of the professional staff supervised.

105 Physician

A Board of Medicine licensed or Board eligible physician (including all medical specialties, e.g dentist, podiatrist except psychiatry) with either an MD or DO degree whose primary responsibility is delivery or supervision of health/medical care to program participants.

Price Range: $58,096.00 to $80,548.00

106 Physician's Assistant

An individual registered as a physician's assistant by the Department of Public Health and functioning in that capacity.

Price Range: $37,293.00 to $51,422.00

107 Registered Nurse - Masters, Psychiatric Nurse, Nurse Practitioner, Nurse Midwife, Nurse Anesthetist

An individual who possesses a masters degree in nursing and/or is registered by the Board of Registration in Nursing as a registered nurse or as a nurse practicing in an expanded role and functioning in any of the above capacities.

Price Range: $33,779.00 to $56,909.00

108 Registered Nurse

An individual who is licensed as a registered nurse by the Board of Registration in Nursing (both BSN's and others) and is engaged in nursing duties.

Price Range: $30,347.00 to $43,243.00

109 Licensed Practical Nurse

A person licensed as a practical nurse by the Board of Registration in Nursing and engaged in nursing duties.

Price Range: $21,216.00 to 30,224.00

110 Pharmacist

A person licensed by the Board of Registration in Pharmacy and functioning as a pharmacist.

Price Range: $29,910.00 to $43,243.00

111 Occupational Therapist

An individual registered as an occupational therapist by the Board of Allied Health Professionals and who provides occupational therapy.

Price Range: $31,424.00 to $43,329.00

112 Physical Therapist

A person registered as a physical therapist by the Board of Allied Health Professionals and who provides physical therapy.

Price Range: $26,894.00 to $39,104.00

113 Speech/Language Pathologist, Audiologist

An individual registered as a Speech/Language Pathologist or an Audiologist by the Board of Registration of Speech/ Language Pathology and Audiology and who provides speech and hearing therapy.

Price Range: $32,746.00 to $45,151.00

114 Dietician/Nuitritionist

An individual registered as a dietician by the Commission on Dietetic Registration of the American Dietetic Association and providing nutritional counseling, education, supervision of meal/menu preparation or, an individual with a bachelors or masters degree in nutrition who provides nutritional counseling, education, supervision of meal/menu preparation.

Price Range: $24,232.00 to $35,443.00

115 Special Education Teacher

A teacher certified in special education by the Massachusetts Department of Education and working in that capacity.

Price Range For 12 Month Program:

115-1	**Masters**	**$26,992.00 to $42,684.00**
115-2	**Bachelors**	**$25,175.00 to $39,312.00**

Price Range For 180 Day Program:

115-1	**Masters**	**$22,493.00 to $35,570.00**
115-2	**Bachelors**	**$20,979.00 to $32,760.00**

116 Teacher

A teacher holding certification by the Massachusetts Department of Education in an area other than special education and working in that capacity.

Price Range:

116-1	**Masters**	**$22,493.00 to $35,570.00**
116-2	**Bachelors**	**$20,979.00 to $32,760.00**

117 Day Care Director

An individual certified by the Office For Children as a Day Care Director and functioning in that capacity.

Price Range: $22,902.00 to $35,269.00

118 Day Care Lead Teacher

An individual certified by the Office For Children as a Day Care Lead Teacher and functioning in that capacity.

Price Range: $20,300.00 to $30,800.00

119 Day Care Teacher

An individual certified by the Office For Children as a Day Care Teacher and functioning in that capacity.

Price Range: $16,675.00 to $25,300.00

120 Day Care Assistant Teacher/Aide

An individual certified by the Office For Children as a Day Care Assistant Teacher/Aide and functioning in that capacity.

Price Range: $14,500.00 to $22,000.00

121 Psychiatrist

An individual licensed to practice medicine, certified or eligible for certification by the American Board of Psychiatry and primarily involved in rendering or directing psychiatric care.

Price Range: $58,396.00 to $111,000.00

122 Psychologist - Doctorate

An individual holding a doctoral degree in psychology (including behavioral psychologists and neuropsychologists), or a closely related field, registered as a psychologist by the Board of Registration of Psychologists and primarily engaged in providing diagnostic evaluations, psychological counseling/therapy or development and implementation of behavioral treatment plans.

Price Range: $42,000.00 to $62,778.00

123 Psychologist - Masters

An individual holding a masters degree in psychology (including behavioral psychologists) or a closely related field and primarily engaged in providing diagnostic evaluations, psychological counseling or development and implementation of behavioral treatment plans.

Price Range: $24,645.00 to $47,084.00

124 Social Worker - LICSW

An individual registered as a licensed independent clinical social worker by the Board of Registration of Social Workers and primarily engaged in providing diagnostic evaluations, psychological counseling/therapy or development and implementation of behavioral treatment plans.

Price Range: $24,645.00 to $47,084.00

125 Social Worker - LCSW

An individual registered as a licensed certified social worker by the Board of Registration of Social Workers and providing social work services (including casework/ counseling).

Price Range: $21,849.00 to $32,000.00

126 Social Worker - LSW

An individual registered as a licensed social worker by the Board of Registration of Social Workers and providing social work services (including casework/counseling).

Price Range: $19,049.00 to $25,300.00

127 Licensed Counselor
An individual with at least a masters degree in counseling, or related discipline, licensed by the appropriate Board of Registration and providing counseling services.
Price Range: $19,049.00 to $25,300.00

128 Certified Vocational Rehabilitation Counselor
An individual who is certified by the Committee on Accreditation of Rehabilitation Facilities and who provides vocational rehabilitation counseling.
Price Range: $22,400.00 to $30,800.00

129 Certified Alcoholism Counselor, Certified Drug Abuse Counselor, Certified Alcoholism/Drug Abuse Counselor
An individual who is registered as either an Alcoholism Counselor, a Drug Abuse Counselor or both by the Massachusetts Board of Substance Abuse Counselor Certification and who provides counseling to substance abusers.
Price Range: $22,400.00 to $30,800.00

130 Counselor
An individual who provides therapeutic or instructive counseling to program clients/service recipients.
Price Range: $18,400.00 to $25,300.00

131 Case Worker/Manager - Masters
An individual possessing at least a masters degree in counseling, or closely related discipline who provides casework/case management services including service eligibility determination, service plan development, service coordination, resource development, advocacy, etc.
Price Range: $19,049.00 to $25,300.00

132 Case Worker/Manager
An individual who provides casework/case management services including service eligibility determination, service plan development, service coordination, resource development, advocacy, etc.
Price Range: $18,400.00 to $25,300.00

133 Direct Care/Program Staff Supervisor

A staff member whose primary responsibility is the supervision of nonprofessional or paraprofessional direct care/program staff in the performance of their programmatic functions or whose duties involve significant responsibility for program operation or logistics. Note that a supervisor may perform incidental direct client care.

Price Range: Up to 1.20 times the average price range of the Direct Care/ Program Staff (134, 135, 136) supervised.

134 Direct Care/Program Staff III

Staff, other than those defined above, requiring a doctoral or masters degree, specific credentials or licensure, significant experience, or specialized skills, who are responsible for the general daily care of program clients/service recipients or for primary program service delivery. This category may also be used to reflect a shift differential or a bilinguality (including American Sign Language) or based on developmental needs of the client(s) requirement for staff otherwise categorized as Direct Care/Program Staff II.

Price Range: $20,300.00 to $30,800.00

135 Direct Care/Program Staff II

Staff, other than those defined above, requiring a bachelors degree, experience or specific skills, who are responsible for the general daily care of program clients/service recipients or for primary program service delivery. This category may also be used to reflect a shift differential or bilinguality (including American Sign Language) or based on developmental needs of the client(s) requirement for staff otherwise categorized as Direct Care/Program Staff I.

Price Range: $16,675.00 to $25,300.00

136 Direct Care/Program Staff I

Staff, other than those defined above, who are responsible for the general daily care of program clients/service recipients or for primary program service delivery, this includes relief employees on payroll.

Price Range: $14,500.00 to $22,000.00

137 Program Secretarial, Clerical Staff

Program secretarial, clerical staff required to carry on direct program clerical activities such as program or client record keeping. Accounting/Collections Staff are included as part of the Administrative/Support component.

Price Range: $14,404.00 to $21,840.00

138 Program Support, Housekeeping, Maintenance, Janitorial, Groundskeeper, Driver, Cook

Program housekeeping, maintenance, janitorial, grounds keeper, driver, or cook staff to carry on direct program activities for client health and safety. Staff for administrative facilities and functions are included in the Administrative/ Support component.

Price Range: $14,404.00 to $28,350.00

150 Payroll Taxes

Employer's share of FICA, MUICA, Worker's Compensation Insurance, FUTA (in the case of For Profit Providers) and other payroll taxes paid on behalf of the direct care/ program staff listed above.

Price Range: 0.0981 - 0.1291 times the sum of all direct care/ program staff component prices

151 Fringe Benefits

Life, health and medical insurance, pension and annuity plan contributions, day care, tuition benefits and all other non salary/wage benefits received by the direct care/program staff listed above as compensation for their personal services.

Price Range: $2,110.00 to $2,810.00 times the total FTE for all Direct Care/Program Staff.

200 OTHER DIRECT CARE/PROGRAM RESOURCES

This category includes resources, other than direct care staff/program staff, required to carry on direct client care or deliver other primary program services.

201 Program Consultants

Individuals possessing specialized experience or expertise in matters of individual service plan design, program design, program management or operation and engaged to provide technical assistance on matters of appropriate client care, program design, etc.

Price: Use prices as provided under 202 - Direct Care Specialists. If the consultant is not listed, the price is negotiable.

202 Direct Care Specialists

Individuals, in some cases, possessing specialized skills or expertise in client care and treatment, engaged on an as needed, "on call", "standby" or "specialing" basis, to provide client care or treatment, this would include contracted relief.

Price: The price is negotiable. The table represents the maximum reimbursable price.

Code #	Direct Care Specialist	Applicable Reg.
	Physician	114.3 CMR 17.00
202-1	Initial Client Evaluation	
202-2	In Office Services	
202-4	Nurse-LPN	114.3 CMR 24.00
	Nurse-RN	
202-5	Ongoing Patient Care	114.3 CMR 24.00
202-6	Consultation	114.3 CMR 30.00
202-7	Nurse Practitioner	114.3 CMR 17.00
	Occupational Therapist	114.3 CMR 39.00
202-8	In Office Services	
202-9	Out of Office Services	
	Physical Therapist	114.3 CMR 39.00
202-10	In Office Services	
202-11	Out of Office Services	
202-12	Audiologist	114.3 CMR 39.00
	Speech/Language Therapist	114.3 CMR 39.00
202-13	In Office Services	
202-14	Out of Office Services	

Code #	Direct Care Specialist	Applicable Reg.
202-15	Psychiatrist	114.3 CMR 17.00
202-16	On Call	
202-17	Psychologist-Licensed	114.3 CMR 29.00
202-18	Social Worker-LICSW/LISW	114.3 CMR 30.00
202-19	Counselor-Masters	114.3 CMR 30.00
202-20	Dentist	114.3 CMR 14.00
202-21	Chiropractor	114.3 CMR 28.00
202-22	Podiatrist	114.3 CMR 26.00
202-23	Personal Care Attendant	114.3 CMR 9.00
202-24	Direct Care/Program Staff	$7.00 16.00

203 Provider Reimbursement/Stipends

Per diem reimbursement to independent individual care givers (not provider agency employees), such as family day care providers, specialized home care providers or foster families, to compensate them for their personal services and to defray all or a portion of the costs associated with client care in their homes.

Code #	Program Type	Price per client/day
203-1	DSS Family Day Care	$16.38-$16.73
	DSS Foster Family Care:	
203-2	Child under age 13	$13.65
203-3	Child age 13 or over	$16.29
203-4	DYS Foster Family Care	$15.95
203-5	DMH Specialized Home Care	$20.00-$35.00
203-6	DMH Therapeutic Family Care	$20.00-$35.00
	DPW/Medicaid Adult Foster Care:	
203-7	Basic	$13.00
203-8	Respite	$22.00

204 Staff Training

Formal instruction to meet professional continuing education requirements, to satisfy program licensure requirements or to enable direct care staff to acquire and maintain acceptable levels of knowledge, skill and proficiency for the routine performance of their assigned functions. (Note that the staff time devoted to training should be included in the calculation of required direct care staff FTE's.; Staff tuition/educational benefits paid as a condition of employment should be included in "Fringe Benefits".)

Price: Negotiable

205 Staff Mileage/Travel

Direct care staff travel within the normal scope of the staff members' assigned duties. This category includes use of a staff member's own vehicle as well as public transportation.

Price: $.22/mile

206 Subcontracted Direct Care

Client care or other program services which are a primary and integral part of the total program but which are furnished to the program, under contract, by a separate program of another provider.

Price: The Division of Purchased Services or Rate Setting Commission Certified Program Rate must be used if applicable. Otherwise the price is negotiable.

207 Meals

Food stuffs, cooking materials, and other resources (other than staff compensation) required for the planning, preparation and serving of meals and snacks to clients and, if programmatically necessary, staff.

Price: In the case of programs serving more than 30,000 meals per year, price is negotiable. In all other cases, refer to the table below:

		Price Range per Meal/Snack
207-1	Adult	$1.89 - 2.12
207-2	Adolescent	$1.83 - 2.19
207-3	School Aged Child	$1.41 - 1.92
207-4	Preschool Child	$0.93 - 1.28
207-5	Infants	$19.72/ week

Special Dietary Needs Costs are negotiable.

208 Client Transportation

The resources (other than staff compensation) associated with transportation of clients to/from/among program sites as a routine part of program participation. This category shall include owned (depreciation and finance charges) or leased vehicles, all associated operating and maintenance costs, contracted transportation, etc.

Price Ranges

208-1	Sedan	$ 3,780.00 - $ 6,000.00 + $.21/mile
208-2	8 Pass Van	$ 4,380.00 - $ 6,000.00 + $.21/mile
208-3	12 Pass Van	$ 5,400.00 - $ 8,400.00 + $.21/mile
208-4	15 Pass Van	$ 9,000.00 - $14,400.00 + $.21/mile

208-9 Contracted Transportation Service - Price is negotiable.

209 Incidental Health/Medical Care

The resources (other than staff compensation) associated with providing health/medical care on an as needed or emergency basis to clients of a program which is not primarily intended to address the medical needs of program participants (including ambulance).

Price: Negotiable

210 Medicine/Pharmacy

The resources (other than staff compensation) associated with on site inventory and administration of medically necessary prescription pharmaceuticals, patent medicines and medical supplies.

Price: Negotiable

211 Client Personal Allowances

Cash paid to program clients as an incentive to program participation, as part of instruction in money management, to give clients a measure of economic independence, to acquire personal items, or other program purpose. This category includes "indirect" client wages ("wages" which are not related to the economic value of the client's work product/productivity).

Price: Negotiable

212 Provision of Material Goods, Services and Benefits

Resources, other than those defined above, associated with provision of material goods or services - such as prosthetic and adaptive devices, nutrition or day care vouchers - to eligible program clients/recipients.

Price: Negotiable

213 Data Processing

Resources (other than staff compensation) associated with the collection, analysis and reporting of data as a primary program function (as distinguished from data processing as an administrative or support function), including owned (depreciation and finance charges) or leased computer hardware and software.

Price: Negotiable

214 Commercial Income Resources

Resources, other than those defined above, such as raw materials, production equipment and consumables, client wages benefits and taxes, freight and transportation, and marketing, associated with the use of client labor in the production or assembly of a product or service as a part of the clients' program of vocational training/rehabilitation or sheltered employment.

Price: Negotiable

215 Program Supplies and Materials

Program residential, educational, vocational and recreational supplies and materials routinely required for ongoing direct client care or program service delivery (includes public transportation, "field trips", etc. not included in Client Transportation, above).

Price Range: The sum of all applicable prices, below:

215-1	Special Education Classroom Supplies	Negotiable
215-2	General Educational Supplies	Negotiable
215-3	Recreational Supplies	Negotiable
215-4	Other Supplies/Materials	Negotiable

301 Program Facilities

Owned or leased program facilities and grounds (including rent, mortgage interest and building depreciation).
Price: Negotiable

390 Facilities Operation, Maintenance and Furnishing

This category includes all resources associated with occupancy, furnishing and maintenance of program facilities including all utilities (other than telephone), housekeeping, routine repair and maintenance, laundry, groundskeeping, lease and routine replacement of program furnishings and equipment (including depreciation and finance charges), homeowners and general liability insurance, real estate taxes or payments in lieu of taxes, and all other such resources/expenses. This component does not include the cost of employees on the payroll, see 138 - Program Support Housekeeping, Maintenance, Groundskeeper, Janitorial, Driver, Cook.

Price Range:

391	Residential Space	$5.50 - 7.25 per square foot
392	Office/Retail Space	$5.00 - 6.00 per square foot
393	Industrial/R&D Space	$4.50 - 6.00 per square foot

400 Program Support

This category is for **direct program support which can be associated with a single program and not allocated across programs.** This category **does not include personnel**, all **program** personnel must be included in components 101 - 138. This category includes office supplies and materials, telephone, advertising and recruitment, postage, printing and reproduction, working capital interest, leasing or routine replacement of office equipment (including depreciation and interest), equipment maintenance, accreditation fees, and professional insurance. This component does not include resources defined as Non-Reimbursable Costs by regulation, e.g. fundraising or discriminatory benefits.
Price Range: Negotiable

410 Agency Administration and Support

This component is for resources which can not be directly associated with one program or combination of programs. **It is an allocation across all agency programs.** This category includes all resources reasonably necessary for the policy making, management, and administration of the provider organization as a whole and all other activities which support direct program activities. This category includes management, administrative, clerical and support personnel, office supplies and materials, leasing or routine replacement of office equipment (including depreciation and interest), telephone, occupancy of administrative premises, advertising and recruitment, postage, printing and reproduction, administrative and support staff training and travel, officer/director/trustee compensation, parent organization costs, investment advice, brokerage, legal, auditing, management consultants and other professional fees, working capital interest, and all other such resources/expenses. This component does not include resources defined as Non-Reimbursable Costs by regulation, e.g. fundraising or discriminatory benefits.

Price: From Table 1 below, multiply the appropriate amount by the sum of all component prices listed above. Then add the adjustment factor from Table 2 below, if applicable.

TABLE 1

Admin/ Code #	Provider Agency Gross Most Recent Financial Statement	Operating Expenses Support Rate
411	$0 - 999,999	Up to 22.47%
412	1,000,000 - 1,999,999	Up to 17.78%
413	2,000,000 - 4,999,999	Up to 14.79%
414	5,000,000 +	Up to 14.35%

TABLE 2 Support Add-Ons

450	Third Party Fees	0.10 times Estimated Collections

INDEX

Alphabetical listing of Expenses and Corresponding Component

Expense	Component
Accounting & Audit Fees	Agency Admin Fees
Accreditation Fees	Program Support
Advertising - Direct Care	Program Support
Ambulance	Incidental Health
Annuity Contribution	Fringe Benefits
Assistant Program Director	Asst Program Director
Audiologist	Speech/Language, etc
Bad Debt	Non-Reimbursable Cost
Case Worker/Manager - Masters	Case Worker/Mgr - Masters
Case Worker/Manager	Case Worker/Manager
Certified Alcoholism/Substance Abuse Counselor	Certified Alcoholism/ Substance Abuse Counselor
Certified Vocational Rehab Counselor	Certified Vocational Rehab Counselor
Client Personal Allowance	Client Personal Allowance
Client Incentive/ Reward Fund	Client Personal Allowances
Client Wages - Direct	Live Work Resources
Contracted Relief	Dir Care/Prog Cons
Cook	Program Support Staff
Counselor	Counselor
Counselor Licensed	Counselor Licensed
Data Processing - Program	Data Processing
Day Care Assistant Teacher/Aide	Day Care Assistant Teacher/Aide
Day Care Director	Day Care Director
Day Care Teacher	Day Care Teacher
Dentist	Physician
Depreciation Eqp/Furn	Prog Supplies
Depreciation Eqp/Furn	Facilities Operation
Depreciation Motor Vehicles	Client Trans
Depreciation Building	Facilities Operation
Dietician	Dietician
Directors & Officers Insurance	Agency Admin Support
Driver	Program Support Staff
FICA (Direct Care)	Payroll Taxes
Finance Charges Equip/ Furn	Facilities Operation
Finance Charges Motor Vehicles	Client Trans
Finance Charges Workg Cap	Program Administration
Finance Charges Workg Cap	Agency Administration
Fines	Non-Reimbursable Cost
Food	Meals
Fundraising	Non-Reimbursable Cost
Equipment Furnishings < $500	Program Supplies
Equipment Furnishings > $500	Facilities Operation
Janitorial - Payroll	Program Support Staff
Janitorial - Contracted	Facilities Operation

Alphabetical listing of Expenses and Corresponding Component

Expense	Component
Legal Fees - Client Related	Program Support
Legal Fees	Agency Admin Support
License Fees	Facilities Operation
Licensed Practical Nurse	Licensed Practical Nurse
Life Insurance (Direct Care)	Fringe Benefits
Maintenance Personnel	Prog. Support Staff
Medical Insurance (Direct Care)	Fringe Benefits
Medicine	Medicine/Pharmacy
Penalties	Non-Reimbursable Cost
Pension (Direct Care)	Fringe Benefits
Professional Insurance -	Program Support
Relief - Contracted	Direct Care /Prog Consult
Relief on Payroll	Direct I, II, III or applicable direct care/ program staff
Security Deposit	Non-Reimbursable Cost
Tuition Benefits	Fringe Benefits
Unemployment Ins. (Direct Care)	Payroll Taxes
Workers Compensation (Direct Care)	Payroll Taxes

SOURCES AND METHODOLOGIES FOR INDIVIDUAL COMPONENT PRICES

The component prices included in this Catalogue were developed for use in FY' 93. This Appendix sets forth, briefly, the methodologies used to develop individual component prices so that they can be followed or refined in developing future years component prices.

In many cases, component prices are based upon published material readily available to the general public. However, in some cases, component prices are based on original survey research conducted by the Office of Purchased Services or analysis of databases developed by OPS or the Division of Purchased Services. In all such cases, DPS will make the databases and analysis available to interested governmental agencies and individuals.

102 Program Director

The Office of Purchased Services conducted a survey of all human service provider staff salaries and associated turnover rates in fiscal year 1990 (the Salary/Turnover Survey). The price ranges for program directors are based upon the slope of the curve defined by plotting the salary and the number of full time equivalent staff supervised for each program director position reported. The curve was then segmented by FTEs supervised and the midpoint of each segment was calculated. The price ranges are the midpoint plus or minus 20 percent. Twenty percent is the average of the standard deviations in program director's salaries for each grouping (segment), weighted by the number of program directors in each grouping and expressed as a percentage of the mean salary of the grouping. Additional weighting was also calculated for the supervision of professional staff.

103 Assistant Program Director

The multiplication factor for each salary range is the average of the ratios of Assistant Program Director salaries reported by survey respondents to the Salary/Turnover Survey in response to Executive Director salaries. This relationship was used as a proxy for the relationship between Program Director and Assistant Program Director because data on the latter were not available. Note however, that this proxy compares favorably with other analyses of the relationship between supervisor/subordinate salaries. See Components 104 and 133.

104 Supervising Professional
The factor is the average of the ratios of total salaries designated as "supervisory" by survey respondents in the OPS Staff Salary/Turnover Survey to total salaries designated as "senior" or "entry level" for each of the staff categories 105-135, weighted by the total number of reported positions in each staff category.

105 Physician
Source: Survey conducted by the Massachusetts League of Community Health Centers in 1991.

106 Physician's Assistant
Source: Unit 7 Collective Bargaining Agreement with the Commonwealth of Massachusetts, Appendix C - Pay Scales Effective October 1, 1989 - Physician's Assistant, Grade 6.

107 Registered Nurse - Masters, Psychiatric Nurse, Nurse Practitioner, Nurse Midwife, Nurse Anesthetist,
Source: Survey conducted by the Massachusetts Hospital Association in 1990.

108 Registered Nurse
Source: Survey conducted by the Massachusetts Hospital Association in 1990.

109 Licensed Practical Nurse
Source: Survey conducted by the Massachusetts Hospital Association in 1990.

110 Pharmacist
Source: Survey conducted by the Massachusetts Hospital Association in 1990.

111 Occupational Therapist
Source: Unit 7 Collective Bargaining Agreement with the Commonwealth of Massachusetts, Appendix C - Pay Scales Effective October 1, 1989 - Occupational Therapist I, Grade 2.

112 Physical Therapist

Source: Survey conducted by the Massachusetts Hospital Association in 1990.

113 Speech Language Pathologist, Audiologist

Source: Unit 7 Collective Bargaining Agreement with the Commonwealth of Massachusetts, Appendix C - Pay Scales Effective October 1, 1989

114 Dietician/Nuitritionist

Source: Survey conducted by the Massachusetts Hospital Association in 1990.

115 Special Education Teacher

Source: Massachusetts Department of Education, Bureau of Data Collection and Reporting, 1989-90 Quirk v. Anrig Salary Schedules, using step 0 as the bottom of the range and step 9 as the top. These schedules, updated annually by DOE, are based on a statewide weighted average of the salary schedules used by the Local Educational Authorities and are mandated for use by the Department of Education in institutional staffing, pursuant to the Quirk v. Anrig case. The first salary range has been increased by 20 percent to account for the year round staffing procedures practiced by some special education programs, i.e. 12 months vs. 10 months.

116 Teacher

Source: Massachusetts Department of Education, Bureau of Data Collection and Reporting, 1989-90 Quirk v. Anrig Salary Schedules, using step 0 as the bottom of the range and step 9 as the top. These schedules, updated annually by DOE, are based on a statewide weighted average of the salary schedules used by the Local Educational Authorities and are mandated for use by the Department of Education in institutional staffing, pursuant to the Quirk v. Anrig case.

117 Day Care Director

Source: A study of salaries for Day Care Directors as reported in the Uniform Financial Reports for the year ending June 30, 1990 submitted to the Division of Purchased Services. The range was determined by disallowing the low and high ends of the range to determine the price.

118 Day Care Lead Teacher

The factor is the ratio of the mean salary for positions designated by the survey respondents in the OPS Staff Salary/Turnover Survey as "Direct Care/Program Staff III" to the mean salary for positions designated as "Direct Care Program Staff I - Entry or Senior Level".

119 Day Care Teacher

The factor is the ratio of the mean salary for positions designated by the survey respondents in the OPS Staff Salary/Turnover Survey as "Direct Care/Program Staff II" to the mean salary for positions designated as "Direct Care Program Staff I - Entry or Senior Level".

120 Day Care Assistant Teacher/Aide

Source: Analysis of the OPS Staff Salary/Turnover Survey. The average annual salary for staff classified as "Direct Care/Program Staff I" was $15,979.00 and the average turnover rate for all such positions was 66.42%. For the same period, the turnover rate for all positions listed in this catalogue was slightly less than 40.00%. The midpoint of the price range, $19,000.00 was set at the reported salary level at which turnover, on average matched the current average for all positions of 40.00%. The survey also disclosed a standard deviation for all direct care/program staff I salaries of approximately $3,000.00. This figure was used to construct a range around the selected midpoint.

121 Psychiatrist

Source: Surveys conducted by the National Council of Community Mental Health Centers, The 1989 Survey of Salary, Benefits and Staffing Patterns of Community Mental Health Providers and the 1989 American Medical Association data published in the Psychiatric Times, January 1991. .

122 Psychologist - Doctorate
Source: American Psychological Association Survey, Earned Income , 1989.

123 Psychologist - Masters
Source: American Psychological Association Survey, Earned Income , 1989.

124 Social Worker - LICSW
Source: Survey conducted by the Mental Health Corporations of Massachusetts, 1991.

125 Social Worker - LCSW
Source: Survey conducted by the Mental Health Corporations of Massachusetts, 1991.

126 Social Worker - LSW
Source: Survey conducted by the Mental Health Corporations of Massachusetts, 1991.

127 Licensed Counselor
See: Social Worker - LSW, Component 126

128 Certified Vocational Rehabilitation Counselor
See: Direct Care/Program Staff III, Component 134

129 Certified Alcoholism Counselor
Certified Drug Abuse Counselor
Certified Alcoholism/Drug Abuse Counselor
See: Direct Care Program Staff III, Component 134.

130 Counselor
See: Director Care/Program Staff II, Component 135.

131 Case/Worker Manager - Masters
See: Licensed Counselor, 127

132 Case Worker/Manager

See Licensed Counselor, Component 133.

133 Direct Care/Program Staff Supervisor

This multiplication factor is the ratio of total salaries designated "supervisory" by survey respondents to the Staff Salary Turnover Survey to total salaries designated as "senior" or "entry level" for each of the staff categories 136-138, weighted by the total number of reported positions in each staff category.

134 Direct Care/Program Staff III

This multiplication factor is the ratio of the mean salary for positions designated by survey respondents in the Staff Salary/Turnover Survey as "Direct Care/Program Staff III" to the mean salary for positions designated as Direct Care/Program Staff I - Entry or Senior Level.

135 Direct Care Program Staff II

This multiplication factor is the ratio of the mean salaries for positions designated by survey respondents in the Staff Salary/Turnover Survey as "Direct Care/Program Staff II - Entry or Senior Level" to the mean salary for positions designated as "Direct Care/Program Staff I - Entry or Senior Level".

136 Direct Care Program Staff I

Source: Analysis of the Staff Salary/Turnover Survey. The average annual salary for staff classified as "Direct Care/Program Staff I" was $15.979.00 and the average turnover rate for all such positions was 66.42%. For the same period, the turnover rate for all positions listed in this catalogue was slightly less than 40.00%. The midpoint of the price range, $19,000, was set at the reported salary level at which turnover, on average, matched the current average for all positions at 40.00%. The survey also disclosed a standard deviation for all direct care/program staff I salaries of approximately $3,000.00. This figure was used to construct a range around the midpoint.

137 Program Secretarial, Clerical Staff

Source: The Boston Bureau of Labor Statistics: Wage and Salary Survey: 1990. The average salary for file clerks and secretaries were used to develop the range for this component.

138 Program Housekeeping, Maintenance, Groundskeeper

Source: The Boston Bureau of Labor Statistics: Wage and Salary Survey: 1990, General Maintenance average salary range.

150 Payroll Taxes

This price range was developed by applying the statutory rates, shown below, to the average of all salaries reported by respondents to the Staff Salary/Turnover Survey and, then, by dividing the resulting dollar amount by the average salary in order to express the result as a percentage.

FICA	7.65 of salaries up to $48,000
MUICA	from 1.4% to 5.6% of salaries only up to $7000.00
Worker's Compensation	Varies - Commonwealth of Mass.' rate of 1.80% was used as a proxy.
FUTA	from 0.8% to 6.2% of salary only up to $7000.00.

151 Fringe Benefits

Source: Several reports and surveys were used to factor the range. Tattered Fringes: The Sad State of Fringe Benefit Packages in Human Service Agencies and What Can Be Done About It, Massachusetts Council of Human Services Providers, Inc., February 1989 was used to determine the type of fringe benefits, the breakdown of health maintenance organizations and standard health plans, the types of benefits available to employees and the percentage of agencies offering specific fringe benefits . A survey of the 1990 premium costs of the health maintenance organizations and health idemnity plans was also analyzed using data from the Division of Insurance. The national average of the type of fringe benefits and percentage offered to employees was also used to factor the price. This data was available in the Occupational Outlook Quarterly, Fall 1990, "Beyond Your Paycheck: An Employee Benefits Primer", Michael Stanton.

202 Direct Care Specialists

All prices are based on the cited Rate Setting Commission regulation except the price ranges for the Direct Care/Program Staff, 202-24, which is based on a survey of Relief Agency fee schedules.

203 Provider Reimbursement/ Stipends

All prices are the current stipend/reimbursment authorized by the purchasing governmental unit except the prices for Specialized Home Care and Therapeutic Foster Care, which are based on actual price paid by the majority of program providers in FY' 90 and the price for Family Day Care Providers which is based on the recommendations of the Governor's Day Care Partnership Advisory Committee on Child Care Staff Recruitment and Retention.

205 Staff Mileage

The source for Staff Mileage, is U.S. General Services Administration, (Investigation of Operating Costs of Privately Owned Vehicles 1990.

207 Meals

The United State Department of Agriculture, Human Nutrition Information Service's Cost of Food at Home, July 1989 was used as the base. This publication gives an average weekly food cost for individuals in 11 age and gender categories and four food "plans" - Thrifty, Low Cost, Moderate and Liberal.

The 11 age and gender categories were collapsed into four categories- Preschool aged children, School aged children, Adolescents and Adults.

The price range was developed by using the low end of the Moderate Plan and the high end of the Liberal Plan.

These figures were divided by 21 to generate per meal cost.

The per meal cost was, then multiplied by 1.047 to adjust for the New England regional differences. The regional adjustment factor was derived by calculating the percentage difference between regional and national Consumer Price Index (All Consumers), Food at Home components for the month of June, 1989.

The regional per meal costs were multiplied by 1.077 to adjust for the inflation which occurred from June 1989 to March 1991. The Inflation adjustment factor was derived for

the June to October amount and, then, dividing the result by the June amount in order to determine a percentage change from June to October.

An additional category was added for meals for infants. Under the Massachusetts Women and Infants Program (WIC) $19.72 is provided per infant for formula supplemented by juice and cereal.

208 Client Transportation

The price range for owned or lease vehicles, 208-2 through 208-5, are based on a survey of automobile leasing companies' annual leasing rates conducted by the Division of Purchased Services, Pricing Bureau.
See: Staff Mileage/Travel, Component 205.

390 Facility, Operation, Maintenance and Furnishing

The prices for Office/Retail and Industrial/R & D Operation, 392 and 393, were derived from the Building Owners and Mangers Association, Experience Exchange Report, 1989, reported "Mid range" of "Operating Expenses per Square Foot" (after excluding "Administrative Expenses") for "All Boston, "All, Suburban, "Boston, Under 50,000 Square Feet" and Suburban, Under 50,000 Square Feet".

410 Agency Administration and Support

The price ranges for this component were developed by an review of 624 Uniform Financial Reports for the year ending 6/30/90, submitted to the Division of Purchased Services. The total dollar amount allocated for administration was subtracted from total expenses (as detailed in the Statement of Revenue and Expense and Change in Fund Balance Schedule, or Supplemental Expense Schedule B, or the Statement of Functional Expenses of the UFR. By dividing the total dollars by the expense-administrative costs the average percentage for administration was determined. Data was sorted by the number of million of dollars of operating expenses and an average administrative percentage for each table was established. A percentage range for each category was then developed using the mean percentage plus one half of a standard deviation.

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FISCAL YEAR 1993 COMPONENT PRICE CATALOGUE
ADDENDUM 1

APRIL 16, 1992

150 Payroll Taxes
Price Range: Negotiable

151 Fringe Benefits
Price Range: Negotiable

202 Direct Care Specialists
Price: This table represents the allowable price according to Rate Setting Commission Regulations.

Psychiatry

Psychiatric Evaluation	$73.00

Private Duty Nursing

	Individual		Agency	
	RN	LPN	RN	LPN
Weekdays	$19.10/hr.	$14.40/hr.	$29.50/hr	$22.35/hr.
Weekends	$20.60/hr.	$15.50/hr.	$31.85/hr.	$24.00/hr.
Holidays	$28.65/hr.	$21.60/hr.	$44.25/hr.	$33.40/hr.

Restorative Services	In-Office		Outside	
	1st 30 Minutes	Next 15 Minutes	1st 30 Minutes	Next 15 Minutes
Physical Therapy	$17.70	$8.90	$18.41	$9.23
Occupational Therapy	$17.70	$8.90	$18.41	$9.23
Speech/Lange Therapy	$17.70	$8.90	$18.41	$9.23

Other service prices are negotiable, unless special services as defined by Rate Setting Commission regulations.

FISCAL YEAR 1993 COMPONENT PRICE CATALOGUE

ADDENDUM 1

APRIL 16, 1992

410 Agency Administration and Support
Price: From Table 1 below, multiply the appropriate percentage by the sum of all component prices listed above. The percentage should be based on the total agency and then applied to each contract. The maximum administrative expense ranges should be graduated, i.e. 22.47% is allowed for the agency's first million dollars, up to 17.78% on the dollars between one and two million dollars, up to 14.79% on the dollars between two and five million dollars and up to 14.35% for the dollars exceeding five million. The agency then has to add up the total dollars allowable for administration according to the ranges and divide it by the total agency expense. This percentage becomes the maximum allowable administrative rate for the agency. This maximum allowable percentage will be the maximum amount reimbursed on a state contract.

If applicable, add the adjustment factor from Table 2 below. This amount should only be applied to the contracts which have third party income, it should not be allocated to contracts which do not have third party income.

Table 1

Provider Agency Gross Operating Expenses According to Most Recent Financial Statement	Support Rate
$ 0 - 999,999	Up to 22.47%
$1,000,000 - 1,999,999	Up to 17.78%
$2,000,000 - 4,999,999	Up to 14.79%
$5,000,000 +	Up to 14.35%

Table 2 Support Add-Ons

Third Party Fees	0.10 times Estimated Collections

FISCAL YEAR 1993 COMPONENT PRICE CATALOGUE

ADDENDUM 1

APRIL 16, 1992

Sleep Positions
Sleep positions should be reported separately on the budget as a Direct Care I component. These positions should not be included with other Direct Care I components. The amount budgeted per FTE for sleep positions can be less than the low end of the range of the Component Price Catalogue. The budget should indicate that this component is for sleep positions.

Overtime Costs
The budget should should indicate the full cost of the component line, but should then note the overtime portion of the cost on the budget as a footnote or other separate method. The inclusion of overtime costs without any notation may cause the component price to exceed the price range, thereby disqualifying a proposal. Price comparisons should only involve the comparison of base salaries to the catalogue amounts.

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Human Service Program Codes
For Fiscal Year 1993

Chelsea Soldier's Home

DEPT	PROGRAM	DEFINITION
CHE	2401	ACUTE CARE-CHELSEA
CHE	2402	LONG-TERM CARE-CHELSEA
CHE	2403	DOMICILIARY CARE-CHELSEA
CHE	2404	OUTPATIENT SERVICES-CHELSEA
CHE	2405	ALZHEIMER'S UNIT-CHELSEA

Disabled Persons Protection Comm.

DEPT	PROGRAM	DEFINITION
DAC	2014	DISABLED ABUSE HOTLINE

Department of Mental Health

DEPT	PROGRAM	DEFINITION
DMH	3020	COMPREHENSIVE STAFF TRAINING
DMH	3021	PSYCHIATRIC RESIDENCY TRAINING
DMH	3022	MULTI-DISCIPLINARY TRAINING
DMH	3030	CRISIS INTERVENTION
DMH	3031	EMERGENCY SHELTER
DMH	3032	CASE MANAGEMENT
DMH	3033	SKILLS TRAINING
DMH	3034	COMMUNITY SUPPORT CLUBHOUSE
DMH	3035	SUPPORTED EMPLOYMENT
DMH	3040	SPECIALIZED RESIDENTIAL
DMH	3041	HIGH INTENSITY RESIDENCE
DMH	3042	MODERATE INTENSITY RESIDENCE
DMH	3043	LOW INTENSITY RESIDENCE
DMH	3044	SATELLITE RESIDENCE
DMH	3045	SUPPORTED HOUSING
DMH	3050	OUTPATIENT SERVICES
DMH	3051	PSYCHIATRIC DAY TREATMENT
DMH	3052	FORENSIC EVALUATION
DMH	3053	DROP-IN CENTER/SOCIAL CLUB
DMH	3054	CONSUMER/FAMILY SUPPORT
DMH	3055	COMMUNITY SUPPORT
DMH	3056	INDIVIDUAL SUPPORT
DMH	3060	CASE MANAGEMENT (CH)
DMH	3061	HOME TREATMENT/CRISIS INTERVENTION
DMH	3062	DAY TREATMENT I
DMH	3063	DAY TREATMENT II
DMH	3064	OUTPATIENT SERVICES (CH)
DMH	3065	COMMUNITY & SCHOOL THERAP. SUPPORT
DMH	3066	INDIVIDUAL SUPPORT(BLANKET)
DMH	3070	CRISIS PLACEMENT
DMH	3071	THERAPEUTIC FAMILY CARE
DMH	3072	RESIDENTIAL TREATMENT I
DMH	3073	RESIDENTIAL TREATMENT II

Department of Mental Health (Continued)

DEPT	PROGRAM	DEFINITION
DMH	3074	RESIDENTIAL TREATMENT III
DMH	3075	FLEXIBLE SUPPORT, RESIDENTIAL
DMH	3080	INTENSIVE RESIDENTIAL TREATMENT
DMH	3091	INPATIENT ADMISSIONS
DMH	3092	ACUTE INPATIENT
DMH	3093	INTERMEDIATE INPATIENT
DMH	3094	EXTENDED INPATIENT
DMH	3095	INTENSIVE INPATIENT (DMU)
DMH	3096	PSYCHOGERIATRIC ACUTE INPATIENT
DMH	3097	PSYCHOGERIATRIC EXTENDED INPATIENT
DMH	3098	INTENSIVE NURSING INPATIENT
DMH	3099	INPATIENT FORENSIC EVALUATION
DMH	3100	SEXUALLY DANGEROUS UNIT
DMH	3101	MR/MI INPATIENT
DMH	3102	DEAF INPATIENT
DMH	3111	PEDIATRIC ACUTE INPATIENT
DMH	3112	PEDIATRIC SPECIALIZED INPATIENT
DMH	3113	ADOLESCENT CRISIS INPATIENT
DMH	3114	ADOLESCENT ACUTE INPATIENT
DMH	3115	ADOLESCENT SPECIALIZED INPATIENT
DMH	3116	OPEN DORM RESIDENCE
DMH	3117	TRANSITIONAL RESIDENCE
DMH	3124	DENTISTRY
DMH	3125	PHYSICAL THERAPY
DMH	3126	OCCUPATIONAL THERAPY
DMH	3127	SPEECH THERAPY
DMH	3128	RECREATIONAL THERAPY
DMH	3129	VOCATIONAL REHABILITATION
DMH	3130	EVENING & WEEKEND COVERAGE
DMH	3131	COMPREHENSIVE MEDICAL SERVICES
DMH	3132	COMPREHENSIVE PSYCHIATRIC SERVICES
DMH	3142	PHARMACY SERVICES

Department of Mental Retardation

DEPT	PROGRAM	DEFINITION
DMR	3150	SPECIALIZED HOME CARE
DMR	3151	RESIDENTIAL FACILITY
DMR	3152	COMMUNITY RESIDENCE
DMR	3153	ICF/A
DMR	3154	ICF/B
DMR	3155	SATELLITE RESIDENTIAL
DMR	3156	LIMITED GROUP HOME
DMR	3157	STAFFED APARTMENT I
DMR	3158	STAFFED APARTMENT II
DMR	3159	SUPERVISED RESIDENCE
DMR	3160	COOP APARTMENT I
DMR	3161	BLANKET RESIDENTIAL
DMR	3163	EDUCATION & TRAINING
DMR	3164	DAY HABILITATION
DMR	3165	DAY AND WORK PREPARATION

Department of Mental Retardation (Continued)

DEPT	PROGRAM	DEFINITION
DMR	3166	BLANKET NON-RESIDENTIAL
DMR	3167	EMPLOYMENT & TRAINING
DMR	3168	SUPPORTED EMPLOYMENT
DMR	3170	CLINICAL TEAM
DMR	3174	SUPPORTIVE SERVICE BLANKET
DMR	3176	FAMILY SUPPORT
DMR	3177	INDIVIDUAL SUPPORT
DMR	3178	MR TRAINING
DMR	3180	NON-FACILITY BASED RESPITE
DMR	3181	PERSONAL CARE ATTENDANT
DMR	3182	TEMPORARY RESIDENTIAL FACILITY
DMR	3191	CORE-NURSING RECRUITMENT
DMR	3196	TRANSPORTATION
DMR	3202	MEDICAL SERVICES
DMR	3207	DENTISTRY SERVICE
DMR	3208	PSYCHIATRY SERVICE
DMR	3211	PHARMACY SERVICE (SPECIAL)
DMR	3212	EMERGENCY MED/AMBULANCE SERVICE
DMR	3239	COSMETOLOGY
DMR	3240	PART-TIME DIRECT CARE SERVICES
DMR	3247	SOCIAL SERVICES DIRECT CARE
DMR	3253	VISUALLY IMPAIRED SERVICE
DMR	3263	DIETARY SERVICE
DMR	3279	GUARDIANSHIP SERVICES
DMR	3280	ELDER DAY
DMR	3281	EMERGENCY BLANKET

Department of Corrections

DEPT	PROGRAM	DEFINITION
DOC	7402	CONTRACTED INMATE HOUSING
DOC	7403	MEDICAL AND MENTAL HEALTH

Department of Education

DEPT	PROGRAM	DEFINITION
DOE	5098	BUREAU OF INSTITUTIONAL SCHOOLS PROGRAMS

Department of Public Health

DEPT	PROGRAM	DEFINITION
DPH	3300	AIDS HOME HEALTH/HOME HOSPICE
DPH	3303	CHILDREN & YOUTH/PEDIATRIC
DPH	3306	CHC ADMINISTRATIVE SERVICE
DPH	3307	COMPREHENSIVE ADOLESCENT HEALTH (CAHP)
DPH	3309	CHC DENTAL HEALTH
DPH	330A	COMPREHENSIVE ADOLESCENT HEALTH (CAHP)
DPH	3310	DENTAL HYGIENIST
DPH	3313	DEVELOPMENTAL DAY CARE
DPH	3315	DRIVER ALCOHOL EDUCATION

Department of Public Health (Continued)

DEPT	PROGRAM	DEFINITION
DPH	3317	EARLY INTERVENTION
DPH	3319	FAMILY PLANNING SERVICES
DPH	3320	SUBSTANCE ABUSE PREVENTION & EDUCATION
DPH	3321	GROWTH & NUTRITION CLINICS
DPH	3322	HIV EARLY SCREENING & TREATMENT
DPH	3329	FAMILY HOME VISITING PROGRAM
DPH	332D	AIDS/SUB. ABUSE PREVENTION & EDUCATION
DPH	3330	SPECIAL TRAINING PROJECTS
DPH	3334	ANONYMOUS HIV TESTING AND COUNSELING
DPH	3335	LEAD POISONG PREVENTION
DPH	3340	MCH (PRENATAL & PEDIATRIC)
DPH	3341	MIC (PRENATAL)
DPH	3343	HIV/AIDS HEALTH EDUCATION/RISK REDUCTION
DPH	3344	OCCUPATIONAL HEALTH EDUCATION
DPH	3345	AIDS DRUG REIMBURSEMENT
DPH	3354	PREGNANT & PARENTING ADOLESCENTS (PPAP)
DPH	3358	CHC PRIMARY CARE
DPH	3361	RAPE PREVENTION & VICTIM SERVICES
DPH	3366	RISK INFORMATION SERVICES/POISON CONTROL
DPH	3373	EARLY CHILDHOOD TRAINING
DPH	3375	WIC
DPH	3376	SUBSTANCE ABUSE PREVENTION
DPH	3377	SUBSTANCE ABUSE TRAINING
DPH	3378	DAY TREATMENT SUBSTANCE ABUSE
DPH	3379	SUBSTANCE ABUSE OUTREACH
DPH	337E	SUBSTANCE ABUSE PRIMARY PREVENTION
DPH	3380	BOSTON DRUG TREATMENT IMPROVEMENT PROG.
DPH	3381	CHRONIC DISEASE PREVENTION
DPH	3383	GROUP HOME III-RESIDENTIAL PLACEMENT
DPH	3384	TRANSPORTATION
DPH	3385	OUTPATIENT COUNSELING - SUBSTANCE ABUSE
DPH	3386	RECOVERY HOMES
DPH	3387	RESIDENTIAL THERAPEUTIC COMMUNITIES
DPH	3388	TRANSITIONAL CARE FACILITY
DPH	3389	PUBLIC INEBRIATE PROGRAM
DPH	338F	OUTPATIENT COUNSELING-SUBSTANCE ABUSE
DPH	338G	RECOVERY HOMES
DPH	338H	RESIDENTIAL THERAPEUTIC COMMUNITIES
DPH	3390	SHORT TERM INTENSIVE INPATIENT TREATMENT
DPH	3391	NONTRADITIONAL SERVICES -SUBSTANCE ABUSE
DPH	3392	SUPPORTIVE HOUSING
DPH	3393	VOCATIONAL EDUCATION
DPH	3394	REGIONAL PRIMARY PREVENTION CENTER
DPH	3395	RESIDENTIAL SUBSTANCE ABUSE DETOX.
DPH	3397	OUTPATIENT METHADONE SERVICES
DPH	3398	NON-MEDICAL DETOX.
DPH	3399	INFORMATION & REFERRAL SERVICES
DPH	339J	NONTRADITIONAL SERVICES-SUBSTANCE ABUSE
DPH	339K	REGIONAL PRIMARY PREVENTION CENTERS
DPH	339L	RESIDENTIAL SUBSTANCE ABUSE DETOX.
DPH	339M	OUTPATIENT METHADONE SERVICES
DPH	339R	SHORT TERM INTENSIVE INPATIENT TREATMENT

Department of Public Health (Continued)

DEPT	PROGRAM	DEFINITION
DPH	3400	CRIMINAL JUSTICE PROGRAM
DPH	3401	DUIL 14 DAY RESIDENTIAL
DPH	3402	AIDS CLIENT ADVOCACY & EDUCATION
DPH	3403	AIDS EDUCATION & PREVENTION
DPH	3404	CHC PATIENT SERVICES
DPH	3405	CAMPERSHIP
DPH	3406	FAMILY SUPPORT SERVICES--OPEN ORDER
DPH	3407	CIT REFERRALS--OPEN ORDER
DPH	3408	FAMILY PLANNING/HIV EDUCATION
DPH	3410	STATE COOPERATING STD CLINICS
DPH	3411	SERVICES TO COMPULSIVE GAMBLERS
DPH	3412	COMPREHENSIVE DENTAL CARE/FLUORIDATION
DPH	3414	YOUTH INTERVENTION
DPH	3415	AIDS HOSPICE
DPH	3416	HIV/AIDS SUPPORT SERVICES/RESIDENTIAL
DPH	3417	ACUPUNCTURE DETOX.
DPH	3419	COMBINED ADOLESCENT PROGRAMS (CAHP&PPAP)
DPH	341N	STATE COOPERATING STD CLINICS
DPH	3420	EXTENDED EARLY INTERVENTION
DPH	3421	LEAD POISONING INTERIM SERVICES
DPH	3422	SCHOOL BASED HEALTH CENTERS
DPH	3423	HIV/AIDS TRAINING & RELATED SUPPORT
DPH	3424	TB CLINICS
DPH	3425	PERINATAL COMMUNITY INITIATIVES
DPH	3426	BEHAVIOR REINFORCEMENT
DPH	3427	MEDICAL SERVICES - DPH INSTITUTIONS
DPH	3428	COMMUNITY HIV EDUCATION & COUNSELING
DPH	3429	SHELTER PROGRAM
DPH	342P	TB CLINICS
DPH	342Q	MEDICAL SERVICES - DPH INSTITUTIONS
DPH	3430	HIV/AIDS CONSORTIA
DPH	3431	PEDIATRIC AIDS
DPH	3432	IMMUNIZATION SERVICES
DPH	3433	DISABILITY PREVENTION
DPH	3435	FAMILY PRACTICE RESIDENCY PROGRAM
DPH	3436	BREAST CANCER INITIATIVE
DPH	3437	WOMEN AND PERINATAL HEALTH EDUCATION
DPH	3438	TEEN CHALLENGE FUND
DPH	3439	SOUTHEAST ASIAN BIRTHING PROJECT
DPH	3440	COORDINATED FOOD STAMP OUTREACH
DPH	3441	URINARY INCONTINENCE DEMO. PROJECT
DPH	3442	EMERGENCY MEDICAL SERVICES FOR CHILDREN
DPH	3443	HIV/AIDS DAY TREATMENT
DPH	3470	YOUTH RESIDENTIAL
DPH	3472	PUBLIC HEALTH SERVICES-INDIV.
DPH	3473	PUBLIC HEALTH SERVICES-INDIV.
DPH	3474	PUBLIC HEALTH SERVICES-INDIV.
DPH	3475	PUBLIC HEALTH SERVICES-INDIV.
DPH	3476	PUBLIC HEALTH SERVICES-INDIV.

Department of Social Services

DEPT	PROGRAM	DEFINITION
DSS	ADS0	ADOPTION SUBSIDY
DSS	AMS1	ADOPTION MANAGEMENT SUPPORT
DSS	AMS2	ADOPTION PRODUCT BASED
DSS	CES1	COMPREHENSIVE EMERGENCY SVCS - GENERAL
DSS	CES2	COMPRE. EMERGENCY SVCS - WOMEN AT RISK
DSS	CHC0	CHILD CARE BLANKET
DSS	CHC1	FAMILY PRESERVATION INFANT
DSS	CHC2	FAMILY PRESERVATION TODDLER
DSS	CHC3	FAMILY PRESERVATION INFANT/TODDLER
DSS	CHC4	FAMILY PRESERVATION PRESCHOOL
DSS	CHC5	FAMILY PRESERVATION SCHOOL AGE
DSS	CHC6	FAMILY PRESERVATION FAMILY
DSS	CHC7	CHILD CARE BASIC INFANT
DSS	CHC8	CHILD CARE BASIC TODDLER
DSS	CHC9	CHILD CARE BASIC INFANT/TODDLER
DSS	CHCA	CHILD CARE BASIC PRESCHOOL
DSS	CHCB	CHILD CARE BASIC SCHOOL AGE
DSS	CHCC	CHILD CARE BASIC FAMILY
DSS	CHCD	CHILD CARE FAMILY PRES. TODDLER/PRESCHOO
DSS	CHCE	CHILD CARE BASIC TODDLER/PRESCHOOL
DSS	CHCF	STPC CENTER BASED
DSS	CHCG	STPC FAMILY
DSS	CHCH	FAMILY PRESERV. STPC/CENTER BASED
DSS	CHCI	FAMILY PRESERV. STPC/FAMILY
DSS	CHCJ	CHILD CARE BASIC PRESCHOOL/SCHOOL AGE
DSS	CHCK	CHILD CARE FAMILY PRES. PRESCH/SCHOOL AG
DSS	CHCL	CHILD CARE TRANSITIONAL INF/TOD/PRESCHOO
DSS	CHS1	FAMILY PRESERVATION CHILD CARE SUPPORTS
DSS	COM1	COMMUNITY EDUCATION & TRAINING
DSS	CRS1	COMMUNITY RESIDENTIAL/ 766 M.R.
DSS	CRS2	COMMUNITY RESIDENTIAL/EMOT. DISTURBED
DSS	CRS3	COMMUNITY RESIDENTIAL/766 MULTI-HANDICAP
DSS	CRS4	COMMUNITY RESIDENTIAL/NON-766 CHILDREN
DSS	CRS5	COMMUNITY RESIDENTIAL/NON-766 YNG.PARENT
DSS	CRS9	COMMUNITY RESIDENTIAL/INSTITUTIONAL CARE
DSS	CRSA	SECURE DIAGNOSTIC ASSESSMENT
DSS	CRSB	SECURE TIME OUT
DSS	CRSC	SECURE TREATMENT
DSS	CRSD	RESIDENTIAL TREATMENT
DSS	CRSE	COMMUNITY RESIDENTIAL/INTENSIVE TREATMT
DSS	CRSF	COMMUNITY RESIDENTIAL/TIME OUT
DSS	CRSG	COMMONWORKS SCHOOL
DSS	CRSH	COMMUNITY RESIDENTIAL/RELIEF RESOURCES
DSS	CRSO	COMMUNITY RESIDENTIAL
DSS	FMU1	FAMILY UNIFICATION-FAMILY SKILL BUILDING
DSS	FMU2	FAMILY UNIFICATION-THERAP. FAMILY INTERV
DSS	FMU3	FAMILY UNIF. - SERV. INTEGRATION/ACCESS
DSS	FMU4	FAMILY UNIFICATION - PREVENTIVE CARE
DSS	FMU5	FAMILY UNIFICATION NETWORK
DSS	FOS1	FOSTER CARE WITH RELATIVE
DSS	FOS2	FOSTER CARE UNRELATED
DSS	FOS3	FOSTER CARE ADOPTIVE

Department of Social Services (Continued)

DEPT	PROGRAM	DEFINITION
DSS	FOS4	INVOICED FOSTER CARE W/RELATIVE
DSS	FOS5	INVOICED UNRELATED FOSTER CARE
DSS	FOS6	INVOICED ADOPTIVE FOSTER CARE
DSS	FOS7	RESPITE EXCHANGE - PROVIDER HOME/FAMILY
DSS	FOSB	SPECIALIZED FOSTER CARE
DSS	FOSO	FOSTER CARE
DSS	FRN0	FAMILY PRESERVATION OPEN BID
DSS	FRN1	766 SCHOOL-MENTAL RETARDATION
DSS	FRN2	766 SCHOOL-EMOTIONALLY DISTURB
DSS	FRN3	766 SCHOOL-MULTIPLE HANDICAP
DSS	FRN4	NON-766/GROUP HOME
DSS	FRN5	RESIDENTIAL DIAGNOSTIC SERVICE
DSS	FRN6	FAMILY BASED TREATMENT
DSS	FRN7	FAMILY REUNIFICATION NETWORKS
DSS	FSN1	FAMILY STABILIZATION-FAMILY SKILL BLDG.
DSS	FSN2	FAMILY STABIL.-THERAP. FAMILY INTERVENTI
DSS	FSN3	FAMILY STABIL.-SVC. INTEGRATION/ACCESS
DSS	FSN4	FAMILY STABILIZATION NETWORK
DSS	FSS0	FAMILY SUPPORT SERVICES
DSS	FSS2	FAMILY SUPPORT SERVICES/INDIV. ITEMS
DSS	FSS3	FAMILY SUPPORT SERVICES/PARENT AIDE
DSS	FVC1	FAMILY VISITATION
DSS	GRD0	GUARDIANSHIP SUBSIDY
DSS	HCP3	HOMEFIND/COMMUN.PLACE/UNACCEPTED MINOR
DSS	HOT1	HOTLINE PROTECTIVE
DSS	HOT2	HOTLINE GENERAL
DSS	HOT3	HOTLINE WOMEN AT RISK
DSS	IND1	SERVS. BY IND. /INTERPRETERS
DSS	IND2	SERVS. BY IND. /SEX ABUSE
DSS	IND3	SERVS. BY IND. /LEGAL
DSS	IND4	SERVS. BY IND. /INV. ASS.
DSS	IND5	SERVS. BY IND./PHYSICIANS
DSS	IND6	SERVS. BY IND. /CLIN.CONSULTATION
DSS	IND7	SERVS. BY IND. /PSYCHIATRISTS
DSS	IND8	SERVS. BY IND. /OTHER
DSS	PAM1	PARENT AIDE MANAGEMENT
DSS	PAS0	PARTNER AGENCY SERVICES
DSS	PAS1	PARTNER AGENCY SERVICES/CASE MANAGEMENT
DSS	PAS2	PARTNER AGENCY SERVICES/FAMILY RESOURCES
DSS	PER0	FAMILY PRESERVATION OPEN BID
DSS	PER1	INDEPENDENT LIVING RESIDENTIAL
DSS	PER2	INDEPENDENT LIVING FAMILY BASED TREATMNT
DSS	PER3	INDEPENDENT LIVING NON PLACEMENT
DSS	REC1	OUT/AFTER SCHOOL DELEGATE DAY
DSS	REC2	OUT/AFTER SCHOOL DELEGATE RESIDENTIAL
DSS	REC3	OUT/AFTER SCHOOL DAY SERVICE
DSS	REC4	OUT/AFTER SCHOOL RESIDENTIAL
DSS	REC5	OUT/AFTER SCHOOL ADVENTURE
DSS	SBC0	SUBSTITUTE CARE BLANKET
DSS	SCH1	ALTERNATIVE SCHOOL
DSS	SHL1	RESIDENTIAL EMERG. SHELTER-CHILD
DSS	SHL2	RESIDENTIAL EMERG. SHELTER-WOMEN AT RISK

Department of Social Services (Continued)

DEPT	PROGRAM	DEFINITION
DSS	SHL3	PROVIDER HOME EMERG. SHELTER-CHILD
DSS	SHL4	SAFE HOME EMERG. SHELTER-WOMEN AT RISK
DSS	THS1	COUNSELING TO FAMILIES & INDIVIDUALS
DSS	THS2	COUNSELING TO ADOLESCENTS & FAMILIES
DSS	THS3	ADOLESCENT TRACKING-NON RESIDENTIAL
DSS	THS4	COUNSELING TO IMMIGRANTS & REFUGEES
DSS	THS5	SEXUAL ABUSE COUNSELING
DSS	THS6	COUNSELING-WOMEN AT RISK
DSS	THS7	COMMUNITY BASED COUNSELING-YOUNG PARENTS
DSS	THS8	SCHOOL BASED COUNSELING-YOUNG PARENTS
DSS	THS9	COUNSELING TO HOMELESS FAMILIES
DSS	THSA	INTENSIVE FAMILY INTERVENTION
DSS	THSB	POST LEGAL ADOPTION COUNSELING
DSS	THSD	MEDIATION/CONSUMER HOME FAMILY
DSS	THSE	CLINICAL CONSULTATION/DSS STAF
DSS	TIL1	ADOLESCENT AT HOME/CONSUMER HOME
DSS	TIL2	TRANSITIONAL LIVING-ADOL. RESIDENTIAL
DSS	TIL3	TRANS. LIVING-YOUNG PARENTS RESIDENTIAL
DSS	TIL4	TRANS. LIVING-WOMEN AT RISK
DSS	TIL5	TRANS. LIVING-HOMELESS RESIDENTIAL
DSS	TIL6	TRANS. LIVING-DAILY LIVING/VOCAT. SKILLS
DSS	TIL7	TRANSITIONAL LIVING-ADOL. RESIDENTIAL

Department of Youth Services

DEPT	PROGRAM	DEFINITION
DYS	2500	SECURE TREATMENT
DYS	2501	SECURE DETENTION
DYS	2502	SHELTER CARE
DYS	2503	GROUP CARE
DYS	2504	FOSTER CARE
DYS	2505	TRANSITIONAL MANAGEMENT PROGRAN
DYS	2506	RESIDENTIAL SERVICES BLANKET
DYS	2507	OUTREACH TRACKING
DYS	2508	EDUCATIONAL SERVICES
DYS	2509	TRACKING PLUS
DYS	2510	DETENTION DIVERSION
DYS	2511	TRAINING
DYS	2512	INTAKE
DYS	2513	MEDICAL SERVICES
DYS	2514	DAY TREATMENT
DYS	2515	DIAGNOSTIC
DYS	2516	TRANSITIONAL INDEPENDENT LIVING PROGRAM
DYS	2517	SUPPORT SERVICES
DYS	2523	MEDICAL SERVICES
DYS	2524	EDUCATIONAL SERVICES
DYS	2525	FOSTER CARE
DYS	2526	TRANSITIONAL MANAGEMENT

Executive Office of Elder Affairs

DEPT	PROGRAM	DEFINITION
ELD	8006	HOME CARE/MANAGED CARE POS
ELD	8007	ELDER ABUSE HOTLINE
ELD	8009	PROTECTIVE SERVICES
ELD	8010	GUARDIANSHIP/CONSERV
ELD	8014	HOME CARE CASE MANAGEMENT/A
ELD	8017	CONGREGATE HOUSING
ELD	8020	FOSTER GRANDPARENTS/SENIOR COMPANION
ELD	8021	ELDER LUNCH PROGRAM
ELD	8022	RSVP
ELD	8023	FALL RIVER CARES
ELD	8024	LIVING IS FOR THE ELDERLY (LIFE)
ELD	8025	COORDINATION OF CARE
ELD	8030	TITLE III SUPPORT SERVICES
ELD	8033	ELDERS AT RISK
ELD	8034	SENIOR AIDES SPONSORS
ELD	8035	USDA CASH & COMMODITIES
ELD	8037	ELDER SERVICES CORPS
ELD	8041	PROJECT CARE

Holyoke Soldiers' Home

DEPT	PROGRAM	DEFINITION
HLY	2450	SHARED CONTRACT SERVICES
HLY	2455	ACUTE CARE-HOLYOKE
HLY	2456	LONG TERM CARE-HOLYOKE
HLY	2457	DOMICILIARY CARE-HOLYOKE
HLY	2458	OUTPATIENT SERVICES-HOLYOKE
HLY	2459	ALZHEIMER UNIT-HOLYOKE

Mass. Commission for the Blind

DEPT	PROGRAM	DEFINITION
MCB	2100	MCB MEDICAL EVALUATION
MCB	2101	DIAGNOSTIC AND EVALUATION
MCB	2103	PHYSICAL & MENTAL RESTORATION
MCB	2106	PERSONAL VOCATIONAL ADJUSTMENT
MCB	2110	ON THE JOB TRAINING
MCB	2113	HOMEMAKER
MCB	2115	MOBILITY
MCB	2116	AFTER SCHOOL CHILDREN
MCB	2117	NEW ENGLAND HOME FOR DEAF
MCB	2119	RESPITE CARE
MCB	2122	CLIENT TRAVEL
MCB	2125	CLIENT INTERPRETER SERVICE
MCB	2132	DAY TREATMENT
MCB	2133	INTERDEPARTMENT TEAM CHILD
MCB	2134	DEAF BLIND CONTRACT
MCB	2135	VISION FOUNDATION
MCB	2136	RESIDENTIAL/DAY PROGRAMS
MCB	2138	IIVI/EYES
MCB	2143	WGBH

Mass. Commission for the Blind (Continued)

DEPT	PROGRAM	DEFINITION
MCB	2144	TIC
MCB	2145	COOPERATIVE FUNDING
MCB	2146	CLIENT CONFERENCE

Mass. Comm. Deaf & Hard of Hearing

DEPT	PROGRAM	DEFINITION
MCD	2451	COMMUNICATION ACCESS SERVICES
MCD	2452	MASS ASSISTANCE TECH. PARTNER

Mass. Rehabilitation Commission

DEPT	PROGRAM	DEFINITION
MRC	2200	VOCATIONAL REHABILITATION
MRC	2205	EMPLOYMENT SERVICES
MRC	2215	INDEPENDENT LIVING PROGRAM
MRC	2220	HOME CARE ASSISTANCE
MRC	2225	STATEWIDE HEAD INJURY PROGRAM
MRC	2240	DIVISION OF DISABILITY DETERMINATION

Office for Children

DEPT	PROGRAM	DEFINITION
OFC	2320	CHILD CARE RESOURCE/REFERRAL
OFC	2321	CHILDCARE/DISABLED CHILDREN
OFC	2326	CHILD ABUSE PREVENTION-POS

Office for Refugees & Immigrants

DEPT	PROGRAM	DEFINITION
ORI	2003	DIRECT SERVICES
ORI	2004	COMMUNITY DEVELOPMENT

Parole Board

DEPT	PROGRAM	DEFINITION
PAR	7010	SUBSTANCE ABUSE, PAROLE BOARD

Office of Veterans Services

DEPT	PROGRAM	DEFINITION
VET	2351	115 VETERAN'S BENEFITS ADMIN
VET	2352	MIS VSMIS AUTOMATION PROJECT
VET	2353	OFFICE FOR FEDERAL BENEFITS
VET	2354	CELEBRATION & MEMORIAL HOLIDAYS
VET	2359	GULF WAR VETERANS BONUS
VET	2361	NURSING HOME REVENUE MAXIMIZATION
VET	2362	ELDERS REVENUE MAXIMIZATION
VET	2365	STATE VETS OUTREACH/COUNSELCEN

Office of Veterans Services (Continued)

DEPT	PROGRAM	DEFINITION
VET	2366	CHAS HOUSING INITIATIVE
VET	2370	POST-TRAUMATIC STRESS DISORDER
VET	2385	JOB TRAINING PARTERNERSHIP ACT
VET	2398	HOMELESS VETERANS

Department of Public Welfare

DEPT	PROGRAM	DEFINITION
WEL	2833	JOBS- YOUNG PARENTS PROGRAM
WEL	2834	JOBS- ASSISTED PLACEMENT PROGRAM
WEL	2838	HOMELESS-EAEDC CONTRACTS
WEL	2839	HOMELESS CONTRACTS
WEL	2841	FOOD STAMP OUTREACH
WEL	2862	HOMELESS/FAMILY
WEL	2863	HOMELESS/SUBSTANCE ABUSE
WEL	2865	HOMELESS/YOUNG MOTHERS
WEL	2867	HEALTH CARE FOR HOMELESS
WEL	2868	JOBS- SERVICE DELIVERY AREA
WEL	2880	HOMELESS CONTRACTS
WEL	2886	CHILD CARE
WEL	2890	TRANSITIONAL HOUSING GRANT
WEL	2901	EA - FAMILY SHELTERS CONTRACTS
WEL	2902	EA - SUBSTANCE ABUSE CONTRACTS
WEL	2903	EA - HOUSING SEARCH CONTRACTS
WEL	2904	EA-YOUNG PARENTS CONTRACTS

UNIFORM FINANCIAL STATEMENTS AND INDEPENDENT AUDITOR'S REPORT

(6 / 30 / 93 Version)

For the Year ended : _____ Disk Filed (Y/N): _____

Provider Organization (Legal Name): _____ Massachusetts Vendor Code Number: _ _ _ _ _ _ _ _ _ _ _ _ _ _

Doing business as (If applicable): _____ A.G. Public Charities Acct. #: _ _ _ _ _ _

Business address : _____ (Street) _____ (City) _____ (State) _____ (Zip)

Contact Person : _____ (Name) _____ (Title) ( ) - _____ (Phone : Area Code / Number)

C.P.A. : _____ Management company name: _____

Organization Type Code : _____ If Other, enter Type : _____ Date of Org./Incorp.: _____

501(c)(3) Federal Tax Exemption (Y/N): _____ If Yes, Date of Exemption (MM/DD/YY): _____

Have basic F/S been audited ? (Y/N): _____ If Exemption / Exemption Code # : _____ Principal Purchasing Agency: _____

Program #	Program Name	Program Address	Program Type/Description	MMARS Prog. Code	2nd MMARS Prog. Code
_ _				_ _ _ _	_ _ _ _
_ _				_ _ _ _	_ _ _ _
_ _				_ _ _ _	_ _ _ _
_ _				_ _ _ _	_ _ _ _
_ _				_ _ _ _	_ _ _ _
_ _				_ _ _ _	_ _ _ _
_ _				_ _ _ _	_ _ _ _
_ _				_ _ _ _	_ _ _ _
_ _				_ _ _ _	_ _ _ _
_ _				_ _ _ _	_ _ _ _
_ _				_ _ _ _	_ _ _ _

Note : If your agency is exempt from filing this report (see instructions) complete this cover page only and submit it along with documentation to support the basis of the exemption.

PROVIDER : ______________________ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _

Program #	Program Name	Program Address	Program Type/Description	MMARS Prog. Code	2nd MMARS Prog. Code

PROVIDER : ________________________ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _ _

Program #	Program Name	Program Address	Program Type/Description	MMARS Prog. Code	2nd MMARS Prog. Code

Independent Auditor's Report on Internal Accounting Control

TO BE COMPLETED BY THE INDEPENDENT AUDITOR

SEE INSTRUCTIONS

PROVIDER : _____ Vendor Code: __ __ __ __ __ __ __ __ __ __ __ __ __ __

BALANCE SHEET AS OF ___/___/__ WITH COMPARATIVE TOTALS AS OF ___/___/___

	ASSETS	CURRENT UNRESTRICTED	CURRENT RESTRICTED	ENDOWMENT	PLANT	OTHER	ALL FUNDS THIS YEAR	ALL FUNDS LAST YEAR
1	Cash and Equivalent							
2	Accounts Receivable, Program Services							
3	Allowance for Doubtful Accts.	( )	( )	( )	( )	( )	( )	( )
4	Net Accounts Receivable, Program Services							
5	Other Accounts Receivable							
6	Notes Receivable							
7	Prepaid Expense							
8	Other Current Assets							
9	Investments							
10	**TOTAL CURRENT ASSETS**							
11	Property, Plant, Equipment							
12	Accumulated Depreciation	( )	( )	( )	( )	( )	( )	( )
13	Net Property, Plant, Equipment							
14	Other Assets							
15	Due from Other Funds							
16	**TOTAL ASSETS**							
	LIABILITIES							
17	Accounts Payable							
18	Accrued Expenses							
19	Current Notes Payable							
20	Current Portion of Long Term Debt							
21	Deferred Revenue							
22	Other Current Liabilities							
23	**TOTAL CURRENT LIABILITIES**							
24	Long Term Notes & Mortgages Payable							
25	Other Liabilities							
26	Due to Other Funds							
27	**TOTAL LIABILITIES**							
28	**FUND BALANCES**							
29	**TOTAL LIABILITIES & FUND BALANCE**							

See accompanying Notes to Financial Statements

PROVIDER : _____ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _ _ _

BALANCE SHEET AS OF ___/___/__ WITH COMPARATIVE TOTALS AS OF ___/___/___

	ASSETS	Other	Other	Other	Other	Other	Other	Other
1	Cash and Equivalent							
2	Accounts Receivable, Program Services							
3	Allowance for Doubtful Accts.	( )	( )	( )	( )	( )	( )	( )
4	Net Accounts Receivable, Program Services							
5	Other Accounts Receivable							
6	Notes Receivable							
7	Prepaid Expense							
8	Other Current Assets							
9	Investments							
10	**TOTAL CURRENT ASSETS**							
11	Property, Plant, Equipment							
12	Accumulated Depreciation	( )	( )	( )	( )	( )	( )	( )
13	Net Property, Plant, Equipment							
14	Other Assets							
15	Due from Other Funds							
16	**TOTAL ASSETS**							
	LIABILITIES							
17	Accounts Payable							
18	Accrued Expenses							
19	Current Notes Payable							
20	Current Portion of Long Term Debt							
21	Deferred Revenue							
22	Other Current Liabilities							
23	**TOTAL CURRENT LIABILITIES**							
24	Long Term Notes & Mortgages Payable							
25	Other Liabilities							
26	Due to Other Funds							
27	**TOTAL LIABILITIES**							
28	**FUND BALANCES**							
29	**TOTAL LIABILITIES & FUND BALANCE**							

See accompanying Notes to Financial Statements

PROVIDER : _____ Vendor Code:_ _ _ _ _ _ _ _ _ _ _ _ _ _

STATEMENT OF REVENUE AND EXPENSES, AND CHANGES IN FUND BALANCES FOR THE YEAR ENDED ___/___/___ WITH COMPARATIVE TOTALS FOR ___/___/___

	REVENUES	CURRENT UNRESTRICTED	CURRENT RESTRICTED	ENDOWMENT	PLANT	OTHER	ALL FUNDS THIS YEAR	ALL FUNDS LAST YEAR
1	Gifts, Contributions, Legacies & Bequests							
2	Special Events and Activites							
3	In-Kind Contributions							
4	Grants							
5	Program Service Fees & Reimbursement		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX		
6	Federated Fundraising Organization Allocation							
7	Investment Revenue							
8	Realized Investment Gain\(Loss)							
9	Gain\(Loss) on Sale of Assets							
10	Revenue from Commercial Products & Services		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX		
11	Other Revenue							
12	**TOTAL REVENUE**							
	EXPENSES							
13	Administration (Management & General)							
14	Fundraising							
15	Non-Program							
16	Program Services							
17	**TOTAL EXPENSES**							
18	EXCESS (DEFICIENCY) OF INCOME OVER EXPENSES							
	OTHER CHANGES IN FUND BALANCES							
19	Property & Equipment Acquisitions from Unrestricted Funds							
20	Transfer of Realized Endowment Fund Appreciation							
21	Return to Donor							
22	Other Increases (Decreases)							
23	**FUND BALANCES BEGINNING OF YEAR**							
24	**FUND BALANCES END OF YEAR**							

See accompanying Notes to Financial Statements

PROVIDER: _____ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _ _ _

STATEMENT OF REVENUE AND EXPENSES, AND CHANGES IN FUND BALANCES FOR THE YEAR ENDED ___/___/___ WITH COMPARATIVE TOTALS FOR ___/___/___

		Other	Other	Other	Other	Other	Other	Other
	REVENUES							
1	Gifts, Contributions, Legacies & Bequests							
2	Special Events and Activites							
3	In-Kind Contributions							
4	Grants							
5	Program Service Fees & Reimbursement							
6	Federated Fundraising Organization Allocation							
7	investment Revenue							
8	Realized Investment Gain\(Loss)							
9	Gain\(Loss) on Sale of Assets							
10	Revenue from Commercial Products & Services							
11	Other Revenue							
12	**TOTAL REVENUE**							
	EXPENSES							
13	Administration (Management & General)							
14	Fundraising							
15	Non-Program							
16	Program Services							
17	**TOTAL EXPENSES**							
18	EXCESS (DEFICIENCY) OF INCOME OVER EXPENSES							
	OTHER CHANGES IN FUND BALANCES							
19	Property & Equipment Acquisitions from Unrestricted Funds							
20	Transfer of Realized Endowment Fund Appreciation							
21	Return to Donor							
22	Other increases (Decreases)							
23	**FUND BALANCES BEGINNING OF YEAR**							
24	**FUND BALANCES END OF YEAR**							

See accompanying Notes to Financial Statements

PROVIDER : _____ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _ _ _ UFR / SFE Page 1 of__

STATEMENT OF FUNCTIONAL EXPENSES

For the Year Ended : ___/___/___

	TOTALS	ADMINISTRATION (MNGT. & GEN.)	FUND RAISING	NON-PROGRAM	TOTAL ALL PROGRAMS	OUT OF STATE NO MA. CLIENTS
1. Employee Compensation & Related Expenses						
2. Occupancy						
3. Other Program / Operating Expense						
4. Administrative Expense						
5. Other Expenses						
6. Depreciation of Buildings and Equipment						
7. **TOTAL EXPENSES**						

See Accompanying Notes to Financial Statements

PROVIDER : _____ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ UFR / SFE Page 2 of__

STATEMENT OF FUNCTIONAL EXPENSES

For the Year Ended : ___/___/___

	PROGRAM # ---- ----	PROGRAM # ---- ----	PROGRAM # ---- ----	PROGRAM # ---- ----	PROGRAM # ---- ----	PROGRAM # ---- ----
1. Employee Compensation & Related Expenses						
2. Occupancy						
3. Other Program / Operating Expense						
4. Administrative Expense						
5. Other Expenses						
6. Depreciation of Buildings and Equipment						
7. TOTAL EXPENSES						

See Accompanying Notes to Financial Statements

PROVIDER : _____ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ UFR / SFE Page __ of__

STATEMENT OF FUNCTIONAL EXPENSES

For the Year Ended : ___/___/___

	PROGRAM # ---- ----	PROGRAM # ---- ----	PROGRAM # ---- ----	PROGRAM # ---- ----	PROGRAM # ---- ----	PROGRAM # ---- ----
1. Employee Compensation & Related Expenses						
2. Occupancy						
3. Other Program / Operating Expense						
4. Administrative Expense						
5. Other Expenses						
6. Depreciation of Buildings and Equipment						
7. **TOTAL EXPENSES**						

See Accompanying Notes to Financial Statements

Notes to Financial Statements

SEE INSTRUCTIONS

A: SUPPLEMENTAL REVENUE SCHEDULE, FY END : ____/____/____

	REVENUE	TOTALS *	ADMIN. (MNGT. & GEN.)	FUND RAISING	NON-PROGRAM	TOTAL ALL PROGRAMS	OUT OF STATE NO MA. CLIENT
1	Gifts,Contrib.,Legacies,Bequests - Unrest.						
2	Gifts,Contrib.,Legacies,Bequests - Restr.						
* 3	**TOTAL GIFTS, CONTRIB., LEG., BEQUESTS (Sum 1 + 2)**						
4	Special Events & Activities - Unrest.						
5	Special Events & Activities - Restr.						
* 6	**TOTAL SPECIAL EVENTS & ACTIVITIES (Sum 4 + 5)**						
7	In-kind Contrib. - Government - Personnel			XXXXXXXXX			
8	In-kind Contrib. - Government - Non Personnel			XXXXXXXXX			
9	in-kind Contrib. - Private						
* 10	**TOTAL IN-KIND CONTRIBUTIONS (Sum 7 to 9)**						
11	EOHS Agency Cash Grant		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		
12	Other Ma. / Non-Ma. Govt Cash Grant			XXXXXXXXX			
13	Private Grant - Unrest.						
14	Private Grant - Restr.						
* 15	**TOTAL GRANTS (Sum 11 to 14)**						
16a	Dept. of Correction - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
16b	Dept. of Correction - Cost Reimburement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
17a	Dept. of Medical Security - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
17b	Dept. of Medical Security - Cost Reimbursement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
18a	Dept. of Mental Health - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
18b	Dept. of Mental Health - Cost Reimbursement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
19a	Dept. of Mental Retardation - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
19b	Dept. of Mental Retardation - Cost Reimbursement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
20a	Dept. of Public Health - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
20b	Dept. of Public Health - Cost Reimbursement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
21a	Welfare (Medicaid) - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
21b	Welfare (Medicaid) - Cost Reimbursement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
22a	Welfare / DSS (Voucher Day Care) - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
22b	Welfare / DSS (Voucher Day Care) - Cost Reimbursement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
23a	Welfare (Other) - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
23b	Welfare (Other) - Cost Reimbursement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
24a	Dept. of Social Services - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
24b	Dept. of Social Services - Cost Reimbursement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
25a	Dept. of Youth Services - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
25b	Dept. of Youth Services - Cost Reimbursement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
26a	Ma. Comm. for the Blind - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
26b	Ma. Comm. for the Blind - Cost Reimbursement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
27a	Ma. Comm. for the Deaf - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
27b	Ma. Comm. for the Deaf - Cost Reimbursement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
28a	Mass. Rehab. Comm. - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
28b	Mass. Rehab. Comm. - Cost Reimbursement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
29a	Office for Children - Unit Rate		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
29b	Office for Children - Cost Reimbursement		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
30a	Other EOHS - Unit Rate: _____		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
30b	Other EOHS - Cost Reimbursement: _____		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
31	EOHS Stipends :_____		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
32	Public / Pvt. Partnership Pgm.		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX
33	EOHS Sponsored Client Fees.		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		XXXXXXXXX

A: SUPPLEMENTAL REVENUE SCHEDULE, FY END : ___/___/___

	REVENUE	TOTALS *	ADMIN. (MNGT. & GEN.)	FUND RAISING	NON-PROGRAM	TOTAL ALL PROGRAMS	OUT OF STATE NO MA. CLIENTS
34	Other Ma. Gov. Services Fees		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXX
35	Other Ma. Gov. Sponsored Client Fees		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXX
36	Other Gov. Services Fees - Non Ma.		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX		
37	Other Gov. Sponsored Client Fees - Non Ma.		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX		
38	Medicare (Non Sponsored Clients)		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX		
39	Private indiv. / 3rd Party Fees		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX		
40	Client Resources		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX		
* 41	**TOTAL PROGRAM SERVICE FEES & REIMB. (Sum 16a to 40)**		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX		
42	Federated Fundraising Org. - Unrest.						
43	Federated Fundraising Org. - Restr.						
* 44	**TOTAL FEDERATED FUNDRAISING ORG.(Sum 42 + 43)**						
45	Investment Revenue - Unrest.						
46	Investment Revenue - Restr.						
* 47	**TOTAL INVESTMENT REVENUE (Sum 45 + 46)**						
48	Realized Investment Gain/Loss - Unrest.						
49	Realized Investment Gain/Loss - Restr.						
* 50	**TOTAL REALIZED INVESTMENT GAIN/LOSS (Sum 48 + 49)**						
51	Gain / Loss on Sale of Assets - Unrest.						
52	Gain / Loss on Sale of Assets - Restr.						
* 53	**TOTAL GAIN/LOSS ON SALE OF ASSETS (Sum 51 + 52)**						
* 54	REVENUE FROM COMMERCIAL PRODUCTS & SERVICES			XXXXXXXXXX			
* 55	OTHER REVENUE : _____						
56	SUBTOTAL BEFORE ALLOC. OF ADMIN. (Sum * 3 to * 55)						
57	ALLOCATION OF ADMIN. REVENUE	XXXXXXXXXX					
* 58	**TOTAL REVENUE**						

* TOTALS column amounts must Reconcile to STATEMENT OF REVENUE, EXPENSE & CHANGES in FUND BALANCE "All Funds This Year" column.

A: SUPPLEMENTAL REVENUE SCHEDULE, FY END : ____/____/____

	REVENUE	Program # ___ ___	Program # ___ ___	Program # ___ ___	Program # ___ ___	Program # ___ ___	Program # ___ ___
1	Gifts,Contrib.,Legacies,Bequests - Unrest.						
2	Gifts,Contrib.,Legacies,Bequests - Restr.						
* 3	**TOTAL GIFTS, CONTRIB., LEG., BEQUESTS (Sum 1 + 2)**						
4	Special Events & Activities - Unrest.						
5	Special Events & Activities - Restr.						
* 6	**TOTAL SPECIAL EVENTS & ACTIVITIES (Sum 4 + 5)**						
7	In-kind Contrib. - Government - Personnel						
8	In-kind Contrib. - Government - Non Personnel						
9	In-kind Contrib. - Private						
* 10	**TOTAL IN-KIND CONTRIBUTIONS (Sum 7 to 9)**						
11	EOHS Agency Cash Grant						
12	Other Ma. / Non-Ma. Govt Cash Grant						
13	Private Grant - Unrest.						
14	Private Grant - Restr.						
* 15	**TOTAL GRANTS (Sum 11 to 14)**						
16a	Dept. of Correction - Unit Rate						
16b	Dept. of Correction - Cost Reimbursement						
17a	Dept. of Medical Security - Unit Rate						
17b	Dept. of Medical Security - Cost Reimbursement						
18a	Dept. of Mental Health - Unit Rate						
18b	Dept. of Mental Health - Cost Reimbursement						
19a	Dept. of Mental Retardation - Unit Rate						
19b	Dept. of Mental Retardation - Cost Reimbursement						
20a	Dept. of Public Health - Unit Rate						
20b	Dept. of Public Health - Cost Reimbursement						
21a	Welfare (Medicaid) - Unit Rate						
21b	Welfare (Medicaid) - Cost Reimbursement						
22a	Welfare / DSS (Voucher Day Care) - Unit Rate						
22b	Welfare / DSS (Voucher Day Care) - Cost Reimbursement						
23a	Welfare (Other) - Unit Rate						
23b	Welfare (Other) - Cost Reimbursement						
24a	Dept. of Social Services - Unit Rate						
24b	Dept. of Social Services - Cost Reimbursement						
25a	Dept. of Youth Services - Unit Rate						
25b	Dept. of Youth Services - Cost Reimbursement						
26a	Ma. Comm. for the Blind - Unit Rate						
26b	Ma. Comm. for the Blind - Cost Reimbursement						
27a	Ma. Comm. for the Deaf - Unit Rate						
27b	Ma. Comm. for the Deaf - Cost Reimbursement						
28a	Mass. Rehab. Comm. - Unit Rate						
28b	Mass. Rehab. Comm. - Cost Reimbursement						
29a	Office for Children - Unit Rate						
29b	Office for Children - Cost Reimbursement						
30a	Other EOHS - Unit Rate: _____						
30b	Other EOHS Cost Reimbursement: _____						
31	EOHS Stipends :___ _____						
32	Public / Pvt. Partnership Pgm.						
33	EOHS Sponsored Client Fees.						

PROVIDER: _____ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _ _ _ PAGE A : 2 BOTTOM

A: SUPPLEMENTAL REVENUE SCHEDULE, FY END : ___/___/___

	REVENUE	Program # __ __	Program # __ __	Program # __ __	Program # __ __	Program # __ __	Program # __ __
34	Other Ma. Gov. Services Fees						
35	Other Ma. Gov. Sponsored Client Fees						
36	Other Gov. Services Fees - Non Ma.						
37	Other Gov. Sponsored Client Fees - Non Ma.						
38	Medicare (Non Sponsored Clients)						
* 39	Private Indiv. / 3rd Party Fees						
40	Client Resources						
41	**TOTAL PROGRAM SERVICE FEES & REIMB. (Sum 16a to 40)**						
* 42	Federated Fundraising Org. - Unrest.						
43	Federated Fundraising Org. - Restr.						
44	**TOTAL FEDERATED FUNDRAISING ORG.(Sum 42 + 43)**						
* 45	Investment Revenue - Unrest.						
46	Investment Revenue - Restr.						
47	**TOTAL INVESTMENT REVENUE (Sum 45 + 46)**						
* 48	Realized Investment Gain/Loss - Unrest.						
49	Realized Investment Gain/Loss - Restr.						
50	**TOTAL REALIZED INVESTMENT GAIN/LOSS (Sum 48 + 49)**						
* 51	Gain / Loss on Sale of Assets - Unrest.						
* 52	Gain / Loss on Sale of Assets - Restr.						
* 53	**TOTAL GAIN/LOSS ON SALE OF ASSETS (Sum 51 + 52)**						
54	REVENUE FROM COMMERCIAL PRODUCTS & SERVICES						
55	OTHER REVENUE : _____						
56	SUBTOTAL BEFORE ALLOC. OF ADMIN. (Sum * 3 to * 55)						
* 57	ALLOCATION OF ADMIN. REVENUE						
58	**TOTAL REVENUE**						

* TOTALS column amounts must Reconcile to STATEMENT OF REVENUE, EXPENSE & CHANGES In FUND BALANCE "All Funds This Year" column.

PROVIDER: Vendor Code:

A: SUPPLEMENTAL REVENUE SCHEDULE, FY END : _____

	REVENUE	Program #	Program #	Program #	Program #	Program #	Program #
• 1	Gifts,Contrib.,Legacies,Bequests - Unrest.						
2	Gifts,Contrib.,Legacies,Bequests - Restr.						
3	**TOTAL GIFTS, CONTRIB., LEG., BEQUESTS (Sum 1 + 2)**						
• 4	Special Events & Activities - Unrest.						
5	Special Events & Activities - Restr.						
6	**TOTAL SPECIAL EVENTS & ACTIVITIES (Sum 4 + 5)**						
7	in-kind Contrib. - Government - Personnel						
• 8	in-kind Contrib. - Government - Non Personnel						
9	In-kind Contrib. - Private						
10	**TOTAL IN-KIND CONTRIBUTIONS (Sum 7 to 9)**						
11	EOHS Agency Cash Grant						
12	Other Ma. / Non-Ma. Govt Cash Grant						
• 13	Private Grant - Unrest.						
14	Private Grant - Restr.						
15	**TOTAL GRANTS (Sum 11 to 14)**						
16a	Dept. of Correction - Unit Rate						
16b	Dept. of Correction - Cost Reimbursement						
17a	Dept. of Medical Security - Unit Rate						
17b	Dept. of Medical Security - Cost Reimbursement						
18a	Dept. of Mental Health - Unit Rate						
18b	Dept. of Mental Health - Cost Reimbursement						
19a	Dept. of Mental Retardation - Unit Rate						
19b	Dept. of Mental Retardation - Cost Reimbursement						
20a	Dept. of Public Health - Unit Rate						
20b	Dept. of Public Health - Cost Reimbursement						
21a	Welfare (Medicaid) - Unit Rate						
21b	Welfare (Medicaid) - Cost Reimbursement						
22a	Welfare / DSS (Voucher Day Care) - Unit Rate						
22b	Welfare / DSS (Voucher Day Care) - Cost Reimbursement						
23a	Welfare (Other) - Unit Rate						
23b	Welfare (Other) - Cost Reimbusrement						
24a	Dept. of Social Services - Unit Rate						
24b	Dept. of Social Services - Cost Reimbursement						
25a	Dept. of Youth Services - Unit Rate						
25b	Dept. of Youth Services - Cost Reimbursement						
26a	Ma. Comm. for the Blind - Unit Rate						
26b	Ma. Comm. for the Blind - Cost Reimbursement						
27a	Ma. Comm. for the Deaf - Unit Rate						
27b	Ma. Comm. for the Deaf - Cost Reimbursement						
28a	Mass. Rehab. Comm. - Unit Rate						
28b	Mass. Rehab. Comm. - Cost Reimbursement						
29a	Office for Children - Unit Rate						
29b	Office for Children - Cost Reimbursement						
30a	Other EOHS - Unit Rate: _____						
30b	Other EOHS - Cost Reimbursement: _____						
31	EOHS Stipends :___ _____						
32	Public / Pvt. Partnership Pgm.						
33	EOHS Sponsored Client Fees.						

PROVIDER: Vendor Code:

A: SUPPLEMENTAL REVENUE SCHEDULE, FY END : ___/___/___

	REVENUE	Program # ___ ___	Program # ___ ___	Program # ___ ___	Program # ___ ___	Program # ___ ___	Program # ___ ___
34	Other Ma. Gov. Services Fees						
35	Other Ma. Gov. Sponsored Client Fees						
36	Other Gov. Services Fees - Non Ma.						
37	Other Gov. Sponsored Client Fees - Non Ma.						
38	Medicare (Non Sponsored Clients)						
* 39	Private Indiv. / 3rd Party Fees						
40	Client Resources						
41	**TOTAL PROGRAM SERVICE FEES & REIMB. (Sum 16a to 40)**						
* 42	Federated Fundraising Org. - Unrest.						
43	Federated Fundraising Org. - Restr.						
44	**TOTAL FEDERATED FUNDRAISING ORG.(Sum 42 + 43)**						
* 45	Investment Revenue - Unrest.						
46	Investment Revenue - Restr.						
47	**TOTAL INVESTMENT REVENUE (Sum 45 + 46)**						
* 48	Realized Investment Gain/Loss - Unrest.						
49	Realized Investment Gain/Loss - Restr.						
50	**TOTAL REALIZED INVESTMENT GAIN/LOSS (Sum 48 + 49)**						
* 51	Gain / Loss on Sale of Assets - Unrest.						
* 52	Gain / Loss on Sale of Assets - Restr.						
* 53	**TOTAL GAIN/LOSS ON SALE OF ASSETS (Sum 51 + 52)**						
54	REVENUE FROM COMMERCIAL PRODUCTS & SERVICES						
55	OTHER REVENUE : _____						
56	SUBTOTAL BEFORE ALLOC. OF ADMIN. (Sum * 3 to * 55)						
* 57	ALLOCATION OF ADMIN. REVENUE						
58	**TOTAL REVENUE**						

* TOTALS column amounts must Reconcile to STATEMENT OF REVENUE, EXPENSE & CHANGES in FUND BALANCE "All Funds This Year" column.

PROVIDER: _____

B: SUPPLEMENTAL EXPENSE SCHEDULE, FY END: __/__/__

LN	EXPENSE	TOTALS	ADMIN. (MGT. & GEN.)	FUND RAISING	NON-PROGRAM	TOTAL ALL PROGRAMS	OUT OF STATE NO MA. CLIENTS
1	Direct Care/Prog. Support Sal./Wages		XXXXXXXX	XXXXXXXX	XXXXXXXXXX		
2	Administrative Salary / Wages						
3	Commercial Prod. & Svs. Marketing Wages			XXXXXXXX			
4	**TOTAL SALARY / WAGES (Sum 1 to 3)**						
5	Payroll Taxes						
6	Fringe Benefits						
7	Accrual Adjustments						
8	**TOTAL EMPLOYEE COMP. & RELATED EXP. (Sum 4 to 7)**						
9a	Facility Lease						
9b	Mortgage Interest						
9c	Facility Depreciation						
10a	Facility Operation / Maint. / Furn.						
10b	Leased Program Equipment						
10c	Program Equipment Finance Charge						
10d	Program Equipment Depreciation						
10e	Facility General Liability Insurance						
11	**TOTAL OCCUPANCY (Sum 9a thru 10e)**						
12	Direct Care / Program Consultants						
13	Temporary Help						
14	Provider Reimbursement / Stipends		XXXXXXXX	XXXXXXXX	XXXXXXXXXX		
15	Subcontracted Direct Care		XXXXXXXX	XXXXXXXX	XXXXXXXXXX		
16	Staff Training						
17	Staff Mileage / Travel						
18	Meals						
19a	Client Transportation		XXXXXXXX	XXXXXXXX	XXXXXXXXXX		
19b	Leased Vehicles						
19c	Vehicle Finance Charge						
19d	Vehicle Depreciation						
19e	Vehicle Insurance						
20	Incidental Health / Medical Care		XXXXXXXX	XXXXXXXX	XXXXXXXXXX		
21	Medicine / Pharmacy		XXXXXXXX	XXXXXXXX	XXXXXXXXXX		
22	Client Personal Allowances		XXXXXXXX	XXXXXXXX	XXXXXXXXXX		
23	Provision Material Goods / Svs. / Benefits		XXXXXXXX	XXXXXXXX	XXXXXXXXXX		
24	Data Processing						
25	Direct Client Wages (Commercial Prod. & Svs.)		XXXXXXXX	XXXXXXXX	XXXXXXXXXX		
26	Other Commercial Prod. & Svs. (Live Work)			XXXXXXXX			
27	Program Supplies & Materials		XXXXXXXX	XXXXXXXX	XXXXXXXXXX		
28	**TOTAL OTHER PROG. / OPERAT. EXPENSE (Sum 12 to 27)**						

PROVIDER : _____ VENDOR CODE: _____ PAGE B. 1 BOTTOM

B: SUPPLEMENTAL EXPENSE SCHEDULE, FY END: __/__/__

LN	EXPENSE	TOTALS	ADMIN. (MGT. & GEN.)	FUND RAISING	NON-PROGRAM	TOTAL ALL PROGRAMS	OUT OF STATE NO MA. CLIENTS
29	Officer, Director, Trustee Comp.					XXXXXXXXXX	XXXXXXXXXX
30	Parent Organization Expense					XXXXXXXXXX	XXXXXXXXXX
31	Management Fees					XXXXXXXXXX	XXXXXXXXXX
32	Fund-raising Fees		XXXXXXXXXX		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
33	Legal Fees					XXXXXXXXXX	XXXXXXXXXX
34	Audit Fees					XXXXXXXXXX	XXXXXXXXXX
35	Investment Fees					XXXXXXXXXX	XXXXXXXXXX
36	Management Consultant					XXXXXXXXXX	XXXXXXXXXX
37	Other Professional Fees						
38a	Leased Office Equipment					XXXXXXXXXXX	XXXXXXXXXXX
38b	Office Equipment Finance Charge						
38c	Office Equipment Depreciation						
38d	Administrative Vehicle Lease					XXXXXXXXXXX	XXXXXXXXXXX
38e	Administrative Vehicle Finance Charge					XXXXXXXXXXX	XXXXXXXXXXX
38f	Administrative Vehicle Deprecation					XXXXXXXXXXX	XXXXXXXXXXX
38g	Administrative Vehicle Insurance					XXXXXXXXXXX	XXXXXXXXXXX
38h	Directors & Officers Insurance					XXXXXXXXXXX	XXXXXXXXXXX
38i	Other Finance Charges						
39a	Program Support		XXXXXXXXXX				
39b	Leased Office Program Equipment		XXXXXXXXXX				
39c	Professional Insurance					XXXXXXXXXX	XXXXXXXXXX
39d	Working Capital Interest					XXXXXXXXXX	XXXXXXXXXX
39e	Other: _____					XXXXXXXXXX	XXXXXXXXXX
40	**TOTAL ADMINISTRATIVE EXPENSE (Sum 29 to 39e)**						
t 41	Subtotal Before Allocat. of Admin.(Sum 8 to t 40)						
42	Allocation of Admin. Expense (MGT. & GEN.)	XXXXXXXXXX					
t 43	State Non-Reimbursable Expense						
t 44	Federal Non-Reimbursable Expense						
45	**TOTAL EXPENSE (Sum 41 to 44)**						
46	**TOTAL REVENUE (From Sch. A)**						
47	**EXCESS / DEFIC. SUPPORT OVER EXP. (46 minus 45)**						

* Sum of Lines 41, 43 & 44 for Admin., Fund-raising, Non Program, and Program Services columns (Total All Programs) Must Reconcile to STATEMENT OF REVENUE, EXPENSE & CHANGE IN FUND BALANCES "All Funds This Year" column for Lines 13 thru 16.

t Sum of Lines 41, 43 & 44 for Admin., Fund-raising, Non Program, Program Services and Out-of-State Non-MA Clients column Must Reconcile to each column's Total Expenses on the STATEMENT OF FUNCTIONAL EXPENSES.

PROVIDER: _____ VENDOR CODE: _____ PAGE 2 OF

B: SUPPLEMENTAL EXPENSE SCHEDULE, FY END: __/__/__

LN	EXPENSE	Program #	Program #	Program #	Program #	Program #	Program #
1	Direct Care/Prog. Support Sal./Wages						
2	Administrative Salary / Wages						
3	Commercial Prod. & Svs. Marketing Wages						
4	**TOTAL SALARY / WAGES (Sum 1 to 3)**						
5	Payroll Taxes						
6	Fringe Benefits						
7	Accrual Adjustments						
8	**TOTAL EMPLOYEE COMP. & RELATED EXP. (Sum 4 to 7)**						
9a	Facility Lease						
9b	Mortgage Interest						
9c	Facility Depreciation						
10a	Facility Operation / Maint. / Furn.						
10b	Leased Program Equipment						
10c	Program Equipment Finance Charge						
10d	Program Equipment Depreciation						
10e	Facility General Liability Insurance						
11	**TOTAL OCCUPANCY (Sum 9a thru 10e)**						
12	Direct Care / Program Consultants						
13	Temporary Help						
14	Provider Reimbursement / Stipends						
15	Subcontracted Direct Care						
16	Staff Training						
17	Staff Mileage / Travel						
18	Meals						
19a	Client Transportation						
19b	Leased Vehicles						
19c	Vehicle Finance Charge						
19d	Vehicle Depreciation						
19e	Vehicle Insurance						
20	Incidental Health / Medical Care						
21	Medicine / Pharmacy						
22	Client Personal Allowances						
23	Provision Material Goods / Svs. / Benefits						
24	Data Processing						
25	Direct Client Wages (Commercial Prod. & Svs.)						
26	Other Commercial Prod. & Svs. (Live Work)						
27	Program Supplies & Materials						
28	**TOTAL OTHER PROG. / OPERAT. EXPENSE (Sum 12 to 27)**						

PROVIDER : _____ VENDOR CODE: _____ PAGE B:2 BOTTOM

B: SUPPLEMENTAL EXPENSE SCHEDULE, FY END: __/__/__

LN	EXPENSE	Program #	Program #	Program #	Program #	Program #	Program #
29	Officer, Director, Trustee Comp.	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
30	Parent Organization Expense	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
31	Management Fees	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
32	Fund-raising Fees	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
33	Legal Fees	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
34	Audit Fees	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
35	Investment Fees	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
36	Management Consultant	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
37	Other Professional Fees	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
38a	Leased Office Equipment						
38b	Office Equipment Finance Charge						
38c	Office Equipment Depreciation						
38d	Administrative Vehicle Lease						
38e	Administrative Vehicle Finance Charge						
38f	Administrative Vehicle Deprecation						
38g	Administrative Vehicle Insurance						
38h	Directors & Officers Insurance						
38i	Other Finance Charges						
39a	Program Support						
39b	Leased Office Program Equipment						
39c	Professional Insurance						
39d	Working Capital Interest						
39e	Other: _____						
40	**TOTAL ADMINISTRATIVE EXPENSE (Sum 29 to 39e)**						
t 41	Subtotal Before Allocat. of Admin.(Sum 8 to t 40)						
42	Allocation of Admin. Expense (MGT. & GEN.)						
t 43	State Non-Reimbursable Expense						
t 44	Federal Non-Reimbursable Expense						
45	**TOTAL EXPENSE (Sum 41 to 44)**						
46	**TOTAL REVENUE (From Sch. A)**						
47	**EXCESS / DEFIC. SUPPORT OVER EXP. (46 minus 45)**						

* Sum of Lines 41, 43 & 44 for Admin., Fund-raising, Non Program, and Program Services columns (Total All Programs) Must Reconcile to STATEMENT OF REVENUE, EXPENSE & CHANGE IN FUND BALANCES "All Funds This Year" column for Lines 13 thru 16.

t Sum of Lines 41, 43 & 44 for Admin., Fund-raising, Non Program, Program Services and Out-of-State Non-MA Clients column Must Reconcile to each column's Total Expenses on the STATEMENT OF FUNCTIONAL EXPENSES.

PROVIDER : _____ VENDOR CODE: _____ PAGE B: ___ of ___ to:

B: SUPPLEMENTAL EXPENSE SCHEDULE, FY END: __/__/__

LN	EXPENSE	Program #	Program #	Program #	Program #	Program #	Program #
1	Direct Care/Prog. Support Sal./Wages						
2	Administrative Salary / Wages						
3	Commercial Prod. & Svs. Marketing Wages						
4	**TOTAL SALARY / WAGES (Sum 1 to 3)**						
5	Payroll Taxes						
6	Fringe Benefits						
7	Accrual Adjustments						
8	**TOTAL EMPLOYEE COMP. & RELATED EXP. (Sum 4 to 7)**						
9a	Facility Lease						
9b	Mortgage Interest						
9c	Facility Depreciation						
10a	Facility Operation / Maint. / Furn.						
10b	Leased Program Equipment						
10c	Program Equipment Finance Charge						
10d	Program Equipment Depreciation						
10e	Facility General Liability Insurance						
11	**TOTAL OCCUPANCY (Sum 9a thru 10e)**						
12	Direct Care / Program Consultants						
13	Temporary Help						
14	Provider Reimbursement / Stipends						
15	Subcontracted Direct Care						
16	Staff Training						
17	Staff Mileage / Travel						
18	Meals						
19a	Client Transportation						
19b	Leased Vehicles						
19c	Vehicle Finance Charge						
19d	Vehicle Depreciation						
19e	Vehicle Insurance						
20	Incidental Health / Medical Care						
21	Medicine / Pharmacy						
22	Client Personal Allowances						
23	Provision Material Goods / Svs. / Benefits						
24	Data Processing						
25	Direct Client Wages (Commercial Prod. & Svs.)						
26	Other Commercial Prod. & Svs. (Live Work)						
27	Program Supplies & Materials						
28	**TOTAL OTHER PROG. / OPERAT. EXPENSE (Sum 12 to 27)**						

PROVIDER : _____ VENDOR CODE: _____ PAGE B: ___ of ___ BOTTOM

B: SUPPLEMENTAL EXPENSE SCHEDULE, FY END: __/__/__

LN	EXPENSE	Program #	Program #	Program #	Program #	Program #	Program #
29	Officer, Director, Trustee Comp.	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
30	Parent Organization Expense	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
31	Management Fees	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
32	Fund-raising Fees	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
33	Legal Fees	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
34	Audit Fees	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
35	Investment Fees	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
36	Management Consultant	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
37	Other Professional Fees	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
38a	Leased Office Equipment						
38b	Office Equipment Finance Charge						
38c	Office Equipment Depreciation						
38d	Administrative Vehicle Lease						
38e	Administrative Vehicle Finance Charge						
38f	Administrative Vehicle Deprecation						
38g	Administrative Vehicle Insurance						
38h	Directors & Officers Insurance						
38i	Other Finance Charges						
39a	Program Support						
39b	Leased Office Program Equipment						
39c	Professional Insurance						
39d	Working Capital Interest						
39e	Other: _____						
40	**TOTAL ADMINISTRATIVE EXPENSE (Sum 29 to 39e)**						
t 41	Subtotal Before Allocat. of Admin.(Sum 8 to t 40)						
42	Allocation of Admin. Expense (MGT. & GEN.)						
t 43	State Non-Reimbursable Expense						
t 44	Federal Non-Reimbursable Expense						
45	**TOTAL EXPENSE (Sum 41 to 44)**						
46	**TOTAL REVENUE (From Sch. A)**						
47	**EXCESS / DEFIC. SUPPORT OVER EXP. (46 minus 45)**						

* Sum of Lines 41, 43 & 44 for Admin., Fund-raising, Non Program, and Program Services columns (Total All Programs) Must Reconcile to STATEMENT OF REVENUE, EXPENSE & CHANGE IN FUND BALANCES "All Funds This Year" column for Lines 13 thru 16.

t Sum of Lines 41, 43 & 44 for Admin., Fund-raising, Non Program, Program Services and Out-of-State Non-MA Clients column Must Reconcile to each column's Total Expenses on the STATEMENT OF FUNCTIONAL EXPENSES.

PROVIDER : _____ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ PAGE C : 1 TOP

C: SUPPLEMENTAL EMPLOYEE SCHEDULE, FY END:__/__/__

LN	COMPONENT POSITION TITLE	TOTALS FTE	TOTALS DOLLARS	ADMINISTRATION FTE	ADMINISTRATION DOLLARS	FUND RAISING FTE	FUND RAISING DOLLARS	NON-PROGRAM FTE	NON-PROGRAM DOLLARS	TOTAL ALL PROGRAMS FTE	TOTAL ALL PROGRAMS DOLLARS	OUT OF STATE NO MA. CLIENTS FTE	OUT OF STATE NO MA. CLIENTS DOLLARS
1	Program Director			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
2	Program Function Manager			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
3	Asst. Program Director			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
4	Supervising Professional			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
5	Physician			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
6	Physician Asst.			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
7	N. Midwife, N.P., Psych N.,N.A., R.N.- MA			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
8	R.N. - Non Masters			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
9	L.P.N.			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
10	Pharmacist			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
11	Occupational Therapist			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
12	Physical Therapist			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
13	Speech / Lang. Pathol., Audiologist			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
14	Dietician / Nutritionist			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
15	Spec. Education Teacher			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
16	Teacher			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
17	Day Care Director			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
18	Day Care Lead Teacher			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
19	Day Care Teacher			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
20	Day Care Asst. Teacher / Aide			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
21	Psychiatrist			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
22	Psychologist - Doctorate			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
23	Psychologist - Masters			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
24	Social Worker - L.I.C.S.W.			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
25	Social Worker - L.C.S.W.			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
26	Social Worker - L.S.W.			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
27	Licensed Counselor			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
28	Cert. Voc. Rehab. Counselor			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
29	Cert. Alch. &/or Drug Abuse Counselor			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
30	Counselor			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
31	Case Worker / Manager - Masters			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
32	Case Worker / Manager			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
33	Direct Care / Prog. Staff Superv.			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
34	Direct Care / Prog. Staff III			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
35	Direct Care / Prog. Staff II			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
36	Direct Care / Prog. Staff I			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
37	Prog. Secretarial / Clerical Staff			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
38	Direct Care / Housekeeping Staff			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
39	Direct Care / Maintenance Staff			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
40	Direct Care / Janitorial Staff			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
41	Direct Care / Groundskeeper Staff			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
42	Direct Care / Driver Staff			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
43	Direct Care / Cook Staff			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				
* 44	TOTAL DIRECT CARE/PROG. SUPPORT STAFF (Sum 1 to 43)			XXX	XXXXXXX	XXX	XXXXXXX	XXX	XXXXXXX				

PROVIDER : _____ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

C: SUPPLEMENTAL EMPLOYEE SCHEDULE, FY END: ___/___/___

LN	COMPONENT POSITION TITLE	TOTALS FTE	TOTALS DOLLARS	ADMINISTRATION FTE	ADMINISTRATION DOLLARS	FUND RAISING FTE	FUND RAISING DOLLARS	NON-PROGRAM FTE	NON-PROGRAM DOLLARS	TOTAL ALL PROGRAMS FTE	TOTAL ALL PROGRAMS DOLLARS	OUT OF STATE NO MA. CLIENTS FTE	OUT OF STATE NO MA. CLIENTS DOLLARS
45	Chief Executive Officer												
46	Chief Fiscal Officer												
47	Accounting / Collection Staff/ Clerical/ Support												
48	Administrative / Housekeeping Staff												
49	Administrative / Maintenance Staff												
50	Administrative / Janitorial Staff												
51	Administrative / Groundskeeping Staff												
52	Other Administrative Staff _____												
* 53	**TOTAL ADMINISTRATIVE STAFF (Sum 45 to 52)**												
* 54	Commercial Prod. & Svs. Marketing Staff					XXX	XXXXXXXX						
55	**TOTAL EMPLOYEE FTE/SALARY & WAGE (Sum * 44 to * 54)**												

* Line must reconcile to B : SUPPLEMENTAL EXPENSE SCHEDULE

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PROVIDER : _____ Vendor Code: _____ PAGE C : 2 TOP

C: SUPPLEMENTAL EMPLOYEE SCHEDULE, FY END: ___/___/___

LN	COMPONENT POSITION TITLE	Program # FTE	Program # DOLLARS	Program # FTE	Program # DOLLARS	Program # FTE	Program # DOLLARS	Program # FTE	Program # DOLLARS	Program # FTE	Program # DOLLARS	Program # FTE	Program # DOLLARS
1	Program Director												
2	Program Function Manager												
3	Asst. Program Director												
4	Supervising Professional												
5	Physician												
6	Physician Asst.												
7	N. Midwife, N.P., Psych N.,N.A., R.N.- MA												
8	R.N. - Non Masters												
9	L.P.N.												
10	Pharmacist												
11	Occupational Therapist												
12	Physical Therapist												
13	Speech / Lang. Pathoi., Audiologist												
14	Dietician / Nutritionist												
15	Spec. Education Teacher												
16	Teacher												
17	Day Care Director												
18	Day Care Lead Teacher												
19	Day Care Teacher												
20	Day Care Asst. Teacher / Aide												
21	Psychiatrist												
22	Psychologist - Doctorate												
23	Psychologist - Masters												
24	Social Worker - L.I.C.S.W.												
25	Social Worker - L.C.S.W.												
26	Social Worker - L.S.W.												
27	Licensed Counselor												
28	Cert. Voc. Rehab. Counselor												
29	Cert. Aich. &/or Drug Abuse Counselor												
30	Counselor												
31	Case Worker / Manager - Masters												
32	Case Worker / Manager												
33	Direct Care / Prog. Staff Superv.												
34	Direct Care / Prog. Staff III												
35	Direct Care / Prog. Staff II												
36	Direct Care / Prog. Staff I												
37	Prog. Secretarial / Clerical Staff												
38	Direct Care / Housekeeping Staff												
39	Direct Care / Maintenance Staff												
4O	Direct Care / Janitorial Staff												
41	Direct Care / Groundskeeper Staff												
42	Direct Care / Driver Staff												
43	Direct Care / Cook Staff												
* 44	TOTAL DIRECT CARE/PROG. SUPPORT STAFF (Sum 1 to 43)												

PROVIDER : _____ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ PAGE C : 2 BOTTOM

C: SUPPLEMENTAL EMPLOYEE SCHEDULE, FY END: ____/____/____

LN	COMPONENT POSITION TITLE	Program # FTE	Program # DOLLARS	Program # FTE	Program # DOLLARS	Program # FTE	Program # DOLLARS	Program # FTE	Program # DOLLARS	Program # FTE	Program # DOLLARS	Program # FTE	Program # DOLLARS
45	Chief Executive Officer												
46	Chief Fiscal Officer												
47	Accounting / Col Collection / Clerical / Support												
48	Administrative / Housekeeping Staff												
49	Administrative / Maintenance Staff												
50	Administrative / Janitorial Staff												
51	Administrative / Groundskeeping Staff												
52	Other Administrative Staff _____												
* 53	**TOTAL ADMINISTRATIVE STAFF (Sum 45 to 52)**												
* 54	Commercial Prod. & Svs. Marketing Staff												
55	**TOTAL EMPLOYEE FTE/SALARY & WAGE (Sum * 40 to * 54)**												

* Line must reconcile to B : SUPPLEMENTAL EXPENSE SCHEDULE

UNAUDITED

PROVIDER : _____ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _ _ _ PAGE C : __of__ TOP

C: SUPPLEMENTAL EMPLOYEE SCHEDULE, FY END:__/__/__

LN	COMPONENT POSITION TITLE	Program # ____ FTE	DOLLARS	Program # ____ FTE	DOLLARS	Program # ____ FTE	DOLLARS	Program # ____ FTE	DOLLARS	Program # ____ FTE	DOLLARS	Program # ____ FTE	DOLLARS
1	Program Director												
2	Program Function Manager												
3	Asst. Program Director												
4	Supervising Professional												
5	Physician												
6	Physician Asst.												
7	N. Midwife, N.P., Psych N.,N.A., R.N.- MA												
8	R.N. - Non Masters												
9	L.P.N.												
10	Pharmacist												
11	Occupational Therapist												
12	Physical Therapist												
13	Speech / Lang. Pathol., Audiologist												
14	Dietician / Nutritionist												
15	Spec. Education Teacher												
16	Teacher												
17	Day Care Director												
18	Day Care Lead Teacher												
19	Day Care Teacher												
20	Day Care Asst. Teacher / Aide												
21	Psychiatrist												
22	Psychologist - Doctorate												
23	Psychologist - Masters												
24	Social Worker - L.I.C.S.W.												
25	Social Worker - L.C.S.W.												
26	Social Worker - L.S.W.												
27	Licensed Counselor												
28	Cert. Voc. Rehab. Counselor												
29	Cert. Alch. &/or Drug Abuse Counselor												
30	Counselor												
31	Case Worker / Manager - Masters												
32	Case Worker / Manager												
33	Direct Care / Prog. Staff Superv.												
34	Direct Care / Prog. Staff III												
35	Direct Care / Prog. Staff II												
36	Direct Care / Prog. Staff I												
37	Prog. Secretarial / Clerical Staff												
38	Direct Care / Housekeeping Staff												
39	Direct Care / Maintenance Staff												
40	Direct Care / Janitorial Staff												
41	Direct Care / Groundskeeper Staff												
42	Direct Care / Driver Staff												
43	Direct Care / Cook Staff												
* 44	TOTAL DIRECT CARE/PROG. SUPPORT STAFF (Sum 1 to 43)												

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PROVIDER : _____ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _ _ PAGE C : __of__ BOTTOM

C: SUPPLEMENTAL EMPLOYEE SCHEDULE, FY END:__/__/__

LN	COMPONENT POSITION TITLE	Program # ____ FTE	DOLLARS	Program # ____ FTE	DOLLARS	Program # ____ FTE	DOLLARS	Program # ____ FTE	DOLLARS	Program # ____ FTE	DOLLARS	Program # ____ FTE	DOLLARS
45	Chief Executive Officer												
46	Chief Fiscal Officer												
47	Accounting / Collection Staff/Clerical/Support												
48	Administrative / Housekeeping Staff												
49	Administrative / Maintenance Staff												
50	Administrative / Janitorial Staff												
51	Administrative / Groundskeeping Staff												
52	Other Administrative Staff _____												
* 53	**TOTAL ADMINISTRATIVE STAFF** (Sum 45 to 52)												
* 54	Commercial Prod. & Svs. Marketing Staff												
55	**TOTAL EMPLOYEE FTE/SALARY & WAGE** (Sum * 44 to * 54)												

* Line must reconcile to B : SUPPLEMENTAL EXPENSE SCHEDULE

UNAUDITED

PROVIDER : _____ Vendor Code: _ _ _ _ _ _ _ _ _ _ _ _ _ _ PAGE D:__of__

D: SUPPLEMENTAL PROGRAM STATISTICS SCHEDULE, FY END:__/__/__

		Program #	Program #	Program #	Program #	Program #	Program #
		__ __	__ __	__ __	__ __	__ __	__ __
1.	**TYPE OF REIMBURSEMENT (Enter One Code Only) :** R = Cost Reimbursement U = Negotiated Unit Rate UA = Accomodations Basis Negotiated Unit Rate C = Class / Non-Negotiated Unit Rate CA = Accomodations Basis Class / Non-Negotiated Unit Rate X = No Publicly Sponsored Procurement						
2.	**TOTAL NEGOTIATED PROGRAM EXPENSE (See Instructions):**						
3.	**DEFINED UNIT (See Instructions):**						
4.	**FULL YEAR OPERATION** If in operation for full year this reporting period, enter " 52 ". If in operation for partial year only, enter # weeks in operation.						
5.	**HOURS IN WORK WEEK (Hours = 1 FTE)**						
6.	**TOTAL PROGRAM UNIT CAPACITY** Enter # Units. Must tie to License / Program Contract Attachment A/B if applicable. If not, enter N.						
7.	**TOTAL UNITS DELIVERED TO ALL CLIENTS** Enter # or N.						
8.	**TOTAL UNITS DELIVERED TO PUBLICLY SPONSORED CLIENTS** (Does not necessarily equal # of Invoiced Units. See Instructions.) Enter # or N.						
9.	**TOTAL FREE CARE UNITS (See Instructions):**						
10.	**NUMBER OF MEALS SERVED (See Instructions):**						
11.	**PROGRAM SPACE**						
	a. Type of Facility (Enter Code): R = Residential O = Office I = Industrial C = Charitable (e.g. Churches)						
	b. Square Footage (See Instructions):						
	c. Number of Rooms (See Instructions):						

Provider: _____ Vendor Code: _____

Program Component/Expense	All Programs: Non-Reimbursable Costs All Programs	All Programs: Schedule A Unrest. Revenue for Offset All Programs	Program #: State And/Or Federal Reg. *	Program #: Non-Reimbursable Cost	Program #: Schedule A Unrest. Revenue for Offset Line #	Program #: Schedule A Unrest. Revenue for Offset Dollar Value	Program #: State And/Or Federal Reg. *	Program #: Non-Reimbursable Cost	Program #: Schedule A Unrest. Revenue for Offset Line #	Program #: Schedule A Unrest. Revenue for Offset Dollar Value
Total Direct Care/Prog Support Staff:	$	$				$		$		$
Total Other Direct Care:	$	$				$		$		$
Total Occupancy:	$	$				$		$		$
Total Administrative Support:	$	$		$		$		$		$
** Total Schedule A Unrestricted Revenues: for Offset (Not Public Funds)		$				$				$

tt Subtotal State Non-Reimbursable Costs: $ _____ $ _____ $ _____

tt Subtotal Federal Non-Reimbursable Costs: $ _____ $ _____ $ _____

Total Non-Reimbursable Costs $ _____ $ _____ $ _____

* S- State, F-Federal

** & tt: See Instructions

B-1 Itemized Non-Reimbursable Cost Schedule, FY End: ___ ___ UNAUDITED

Provider: _____ Vendor Code: _____

Program Component/Expense	Program #: State And/Or Federal Reg. *	Non-Reimbursable Cost	Schedule A Unrest. Revenue for Offset Line #	Dollar Value	Program #: State And/Or Federal Reg. *	Non-Reimbursable Cost	Schedule A Unrest. Revenue for Offset Line #	Dollar Value	Program #: State And/Or Federal Reg. *	Non-Reimbursable Cost	Schedule A Unrest. Revenue for Offset Line #	Dollar Value
Total Direct Care/Prog:		$		$		$		$		$		$
Support Staff:												
Total Other Direct Care:		$		$		$		$		$		$
Total Occupancy:		$		$		$		$		$		$
Total Administrative Support:		$		$		$		$		$		$
** Total Schedule A Unrestricted Revenues:				$				$				$
for Offset (Not Public Funds)												
tt Subtotal State Non-Reimbursable Costs:		$				$				$		
tt Subtotal Fed. Non-Reim.Costs:		$				$				$		
Total Non-Reimbursable Costs:		$				$				$		

* S- State, F-Federal

Independent Auditors Report on Internal Accounting Control

TO BE COMPLETED BY THE INDEPENDENT AUDITOR

SEE INSTRUCTIONS

Independent Auditor's Report on Compliance

TO BE COMPLETED BY THE INDEPENDENT AUDITOR

SEE INSTRUCTIONS

Provider Organization's Response to Auditor's Report

TO BE COMPLETED BY MANAGEMENT

SEE INSTRUCTIONS

ACKNOWLEDGMENT OF THE BOARD OF DIRECTORS

TO BE COMPLETED BY BOARD OF DIRECTORS

SEE INSTRUCTIONS

Sample Narrative of Representation Letter

We, the Board of Directors of **XYZ Provider Organization**, met on **Month Day, 199X** and have voted to recognize and accept the representations of management and the expression of opinions by **Name of Independent Auditor** as embodied in the Basic Financial Statements, Supplementary and Subsidiary Financial Statements and Schedules and Independent Auditor's Reports contained in the Uniform Financial Statements and Independent Auditor's Report (UFR) for the period ended **Month Day, 199X.**

In addition, we, the Board of Directors of **XYZ Provider Organization**, hereby certify under penalty of perjury that to the best of our knowledge and belief, all material related party relationships and transactions, as defined by 808 CMR 1.02 and generally accepted government auditing standards, have been correctly and completely disclosed by management in the notes to the financial statements and schedules of the UFR for the period ended **Month Day, 199X.**

Signatory for Board of Directors

_____

Title

_____

Date:

_____